FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000061670 (1)

DAN KING REAL ESTATE, INC.

Principal Place of Business

Mailing Address

FILED Mar 26 1997 8:00am Secretary of State



10075 \$ FEDER. SUITE 161 PORT ST. LUCIE	•		10075 S FEDERAL HIGHWAY SUITE 161 PORT ST. LUCIE FL 34952-5614					
	C 1 C 4100C					3. Date Incorporated or Qualified 3a. Date of Last Report 07/22/1996		l Report
2. Principal Pl	age of Busin	OSS .	2a. Mailing Address		~ ~	4. FEI Number		Applied For
21 874	35	451	26 8043	> V:	SI	65-068///	4	Not Applicable
Suite, Apl =		Suite, Apt #, etc.	e, Apt #, etc.		Certificate of Status Desired \$8.75 Additional Fee Required			
City & State	L , /	E L	City & State	PSL, FL		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
24 347 5		Country ST WUF	29 34952	30 S	LUCIB		Yes No	ir s. 199.032,
		and Address of Current	Registered Agent		41	10. Name and Address of New Re	gistered Agent	
	DEO, DANII			8	1 Name	DANIEL J	アネヘムピ	0
10075 S FEDERAL HIGHWAY SUITE 161 PORT ST. LUCIE FL 34952					2 Street Add	oss /P.O. Pox Number is Not Accept	3 (0)	
					3	1248 3 US		
				8	4 City	9c 1	95 8	in Code at a
						86	FL ° 8	4952
11. Porsuant t	to the provisi	ons of Sections 607.0502	and 607.1508, Florida Stal	ules, the abo	ve-named corp	poration submits this statement for the I	ourpose of changin	g its registered
agent Lar	egisterea ag m familiar wi	ent or boin, in the State o Ih, <u>and accept t</u> he obligat	or Florida. Such change wa tions of, Section 607.0505.	s aumonzeo i F <u>lo</u> rida Statut	es.	tion's board of directors. I hereby acce	pt the appointment	as registered
SIGNATURE.	OANI	oi prated name of registered agent	BOEO C	OTE: Registered A	Alan	red when reinstaling)	DATE	Z
12.		OFFICERS AND	DIRECTORS	13.	7	ADDITIONS/CHANGES TO OFFI		
TITLE	D		DELETE	1.1 TITLE			Chang	ge 🛄 Addition
NAMÉ	TADDEO,			1 2 NAM	E	116	7	
STREET ADDRESS					ET ADDRESS	8243 5 45: PSL. FL. 34		
City-SI-ZiP	PORT ST.	LUCIE FL 34952		1.4 CITY	- ST - ZIP	OFI FL. 34	9384	1
TITLE			DELETE	2.1 TITLE			Chang	ge 🔲 Addition
NAME				2.2 NAM	E			
STREET ADDRESS				2.3 STRE	ET ADDRESS			
CITY S1-2(P					- ST- ZIP			
TOLE	DELETE						Chang	ge Addition
NAME					3.2 NAME			
STREET ADDRESS				3.3 STRE	ET ADDRESS			
CHY-ST-ZIP				3.4. CITY	-S1-ZIP			
TITLE	DELETE						Chang	ge Addition
NAME				4. 2 NAM	ie			
STREET ADDRESS				4.3 STRE	ET ADDRESS			
CITY-ST ZIP				4.4 CITY				
TITLE			DELETE	5.1 TITLE			☐ Chan	ge 🔲 Addition
NAME				52 NAM	ŧ l			
STREET ADORESS				5 3 STAE	ET ADDRESS			
CITY-ST-Z#				5.4 CITY				
TifLE			DELETE	61 TITLE			[] Chang	ge Addition
NAME				6.2 NAM	E			
					1			
STHEET ADDRESS				6.3 STRE	ET ADDRESS			
STREET ADDRESS CHTY+S1+ZFP	ı			6.3 STRE 6.4 CITY				

information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED H PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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