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May 08 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mo[illegible]
Secretary of S[illegible]
DIVISION OF CORPORATIONS

DOCUMENT # P96000076593 (8)

1. Corporation Name
DAN & GEORGE, INC.

Principal Place of Business	Mailing Address
1805 CROWN POINT BLVD. NAPLES FL 34112	1805 CROWN POINT BLVD. NAPLES FL 34112

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip / Country	Zip / Country
24 / 25	29 / 30

3. Date Incorporated or Qualified: 09/13/1996
3a. Date of Last Report:
4. FEI Number: 59-3395518 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

ELI-AV, URI D
1805 CROWN POINT BLVD.
NAPLES FL 34112

10. Name and Address of New Registered Agent

31	Name
32	Street Address (P.O. Box Number is Not Acceptable)
33	
34	City **FL** 35 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, *Florida Statutes*, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	ELI-AV, URI D	
STREET ADDRESS	1805 CROWN POINT BLVD.	
CITY-ST-ZIP	NAPLES FL 34112	
TITLE	D	☐ DELETE
NAME	RICE, GEORGE B	
STREET ADDRESS	1805 CROWN POINT BLVD.	
CITY-ST-ZIP	NAPLES FL 34112	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11		☐ Change ☐ Addition
12	NAME	
13	STREET ADDRESS	
14	CITY-ST-ZIP	
21		☐ Change ☐ Addition
22	NAME	
23	STREET ADDRESS	
24	CITY-ST-ZIP	
31	VP/D	☐ Change ☒ Addition
32	ELIAS, OVADIA R.	
33	1805 CROWN POINT BLVD	
34	NAPLES, FL 34112	
41		☐ Change ☐ Addition
42	NAME	
43	STREET ADDRESS	
44	CITY-ST-ZIP	
51		☐ Change ☐ Addition
52	NAME	
53	STREET ADDRESS	
54	CITY-ST-ZIP	
61		☐ Change ☐ Addition
62	NAME	
63	STREET ADDRESS	
64	CITY-ST-ZIP	

CR2E034 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the 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 on any attachment with an address.

SIGNATURE: [signature] 4/29/97 (941) 417-0944
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #