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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000082122 (8)

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SECRETARY OF STATE TALLAHASSEE FLORIDA



Principal Place of Business 1428 BRICKELL AVENUE BTH FLOOR MIAMI FL 33131		Mailing Address 1428 BRICKELL AVENUE 8TH FLOOR MIAMI FL 33131-3411	1428 BRICKELL AVENUE 8TH FLOOR			3. Date incorporated or Qualified 3a. Date of Last Report		
					10/04/1996	1	ioi i ioport	
2. Principal Place of Business		2a. Mailing Address	2e. Mailing Address		4. FEI Number 07039	23	Applied For Not Applicable	
Suite Apt #, etc		Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·		Certificate of Status Desired			
City & State 23		City & State	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Cour	ntry	B. This corporation has liability for		der s. 199.032,	
24	25	29	30			Yes No		
	9. Name and Address of Cur	rent Registered Agent		81 Name	10. Name and Address of New Re	gistered Agent	<del></del>	
	TMAN, ERIC P		į	Name				
	28 BRICKELL AVENUE H FLOOR		82 Street		ress (P.O. Box Number is Not Acceptal	ole)		
	AMI FL 33131		Ì	83	1.44477 <sub>4</sub>	Ton		
			-	84 City		FL 85	Zip Code	
<b>44</b> Durener	of to the provincions of Costions 607.	NEDO and 607 1509 Florida State	ttoe the ah	Sue pamed corr	poration submits this statement for the		ing its registered	
office or	registered agent, or both, in the Si ani familiar with, and accept the of	ate of Florida. Such change was	authorized	by the corporal	lion's board of directors. I hereby acce	ot the appointmen	nt as registered	
SIGNATURE	Superior type disciplinated name of registeres	flagent and title it applicable (NC	TE Registered	Agent signature requi	red when reinstating)	DATE		
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIREC	TORS IN 12	
7H ( F	PO	DELETE	1.1 1(1	.1	*S0000S	Cha	nge 🔲 Addition	
NAME	LITTMAN, ERIC P	THE COOR	1.2 NA	· · · · · · · · · · · · · · · · · · ·	-04/29	10066 /070107	nnn1	
STREET ASORESS		וח רנטטא		REET ADDRESS	♦ بلادان در ۱۹۰۰ د ۱۹۰ د ۱۹ د ۱۹	ርፎ <b>ቢ</b> ህ ችች ነጋ[በነቦ!	**165.00	
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THE		☐ httrit	21 TIT	·		Cha	nge Addition	
NAME PROCESSOR			2.2 NA	me: Reet address				
STREET ADDRESS CHY+S1-ZP	1		1	TY-ST-ZIP				
TILE		DELETE	3.1 TiT			Cha	nge Addition	
NAME			3.2 NA	1				
STREET ADDRESS	<u>,                                    </u>			REET ADDRESS				
CrTY - S1 - ZiP				TY-ST-ZIP				
104		☐ DELETE	4.1 111	·		Cha	nge Addition	
NAMÉ			4. 2 N/	AME .				
STEEF LADORESS	5 }		4.3 \$1	REEY ADDRESS				
CHY-\$1-2#			4,4 CI	IY-ST-ZIP				
THE		☐ DELETE	5.1 717	· ····		Cha	inge Addition	
NAMi			5.2 NA	ME {				
STREET ACTORESS	§		5.3 ST	reet address				
CRY \$1-76			5.4 CIT	TV-ST-ZIP				
TIFLE		DELETE	6.1 TIT	LE		Cha	nge Addition	
NAV-			6.2 NA	ME				
STREET ADDRESS	S		6.3 ST	REET ADDRESS				
CHY-S1-ZiP			6.4 013	ry+st-zip				

14. To 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 a good, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(26/97 (305)312333