## **FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$5 May 14 1998 8:00am **PROFIT** LORIDA DEPARTMENT FISTATE CORPORATION Sandra B. Morti ANNUAL REPORT Secretary of State Secretary of Star DIVISION OF CORPOR TIONS 1998 P96000088418 (4) DOCUMENT # D. T. FENNEN, INC. Principal Place of Business Mailing Address 3148 SW GOTH LANE 3148 SW 60TH LANE FT LAUDERDALE FL 33314 FT LAUDERDALE FL 33314 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/28/1996 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 65-0703813 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zπ 8. This corporation owes or has paid the current year Intangible Yes 29 Personal Property Tax due June 30. 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 FENNEN, DAWN T 3148 SW 60TH LANE 82 Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33314 83 84 85 Zip Code City 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. Hereby accept the appointment as registered agent. Fam familiar with, and accept the obligations of Section 607,0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TILLE FENNEN, DAWN T NAME 12 NAME 3148 SW 60TH LANE STREET ADDRESS 1.3 STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 21 TITLE 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE ☐ Change TITLE 3.1 HHLF Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE ☐ Change \_\_\_ Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. Thereby 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 suppliemental 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

4/27/98

954-983-3278

Block 12 or Block 13 if changed, or on an attachment with an address

Fennen Inc