

AUG. -28' 97 (THU) 10:49 SIDNEY Z BRODIE

TEL: 305-477-38

FILED

Sep 05 1997 8:00am
Secretary of State

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000090840 (1)

Dei Sorelle, Inc.
f/k/a Prime Cut at Westgate Plaza, Inc.

Principal Place of Business
15912 West State Road 84
Sunrise, Florida 33325
Broward County, Florida

1. Principal Place of Business	2a. Mailing Address
2. Suite, Apt. #, etc.	2b. Suite, Apt. #, etc.
3. City & State	3. City & State
4. Zip	4. Zip
5. Country	5. Country

6. Date incorporated or (re)incorporated	7a. Date of first report
11/96	None
8. EIN Number	9. Appointed or Not Appointed
65-0768367	
10. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	
11. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
☐	
12. This corporation has liability for intangible tax under s. 193 (1)(3), Florida Statutes	☐ Yes ☐ No

Lee D. Glassman, Esquire
2553 Eagle Rune Lane
Weston, Florida 33327

13. Name	14. Name and Address of New Registered Agent
Janice Garvey	
15. Street Address (P.O. Box Number is Not Acceptable)	
15912 West State Road 84	
16. City	17. State
Sunrise	FL
18. Zip	
33325	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation authorizes this statement for the purpose of changing the 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 responsibility as required by Section 607.1508, Florida Statutes.

SIGNATURE: *Janice Garvey* Janice Garvey 08/28/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
2. NAME		1.2 NAME	
3. STREET ADDRESS		1.3 STREET ADDRESS	
4. CITY-STATE-ZIP		1.4 CITY-STATE-ZIP	
5. TITLE		2.1 TITLE	☐ Change ☐ Addition
6. NAME		2.2 NAME	
7. STREET ADDRESS		2.3 STREET ADDRESS	
8. CITY-STATE-ZIP		2.4 CITY-STATE-ZIP	
9. TITLE		3.1 TITLE	☐ Change ☐ Addition
10. NAME		3.2 NAME	
11. STREET ADDRESS		3.3 STREET ADDRESS	
12. CITY-STATE-ZIP		3.4 CITY-STATE-ZIP	
13. TITLE		4.1 TITLE	☐ Change ☐ Addition
14. NAME		4.2 NAME	
15. STREET ADDRESS		4.3 STREET ADDRESS	
16. CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	
17. TITLE		5.1 TITLE	☐ Change ☐ Addition
18. NAME		5.2 NAME	
19. STREET ADDRESS		5.3 STREET ADDRESS	
20. CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
21. TITLE		6.1 TITLE	
22. NAME		6.2 NAME	
23. STREET ADDRESS		6.3 STREET ADDRESS	
24. CITY-STATE-ZIP		6.4 CITY-STATE-ZIP	

14. I hereby certify that the information supplied in this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I have verified that the information indicated on this form is true and accurate and that my signature and the words "notary public" are in the correct order and that the notary public is duly sworn and qualified to execute this report as required by Chapter 007, Florida Statutes, and that my name is in the correct order and that the notary public is duly sworn and qualified to execute this report as required by Chapter 007, Florida Statutes, and that my name is in the correct order and that the notary public is duly sworn and qualified to execute this report as required by Chapter 007, Florida Statutes.

SIGNATURE: *Janice Garvey* Janice Garvey 08/28/97