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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 28 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000099566 (7)

DILLEN PLAZA, INC.

Diseased Diseased Diseases	Malling Advisor		
Principal Place of Business 10442 8W 52ND COURT DCALA FL 34476	Mailing Address 10442 SW 52ND COURT OCALA FL 34476-9411		
			3. Date Incorporated or Qualified 3a. Date of Last Report 12/06/1996
2. Principal Place of Business	2a, Mailing Address		4. FET Number Applied Sq 341545 Not App
Suite, Apt. #, etc.	<b>26</b>		¢0.75 August
2 3016, Apr. #, etc.	27		5. Certificate of Status Desired Fee Require
City & State	City & State		6. Election Campaign Financing \$5.00 May
3	28		Trust Fund Contribution Added to Fee
Zip Country	` <u> </u>	Country	8. This corporation has liability for intangible tax under s. 199. Florida Statutes Yes \(\sime\) Yo \(\sime\) No
	29   ess of Current Registered Agent	30]	10. Name and Address of New Registered Agent
BISHOP, W E JR		81 Name	
7 NE SECOND STREET		82 Street Add	dress (P.O. Box Number is Not Acceptable)
OCALA FL 34470			
		83	
		84 City	FL 85 Zip Code
Control of Control	too COT OF OO and COT 1500 Funida Stat	Liter the above person and	
SIGNATURE Signature, typed or printed name	e of registered agent and title if applicable (N	OTL. Registered Agent signature requ	
SIGNATURE Signature, typed or printed name	e of registered agent and title if applicable (N PFICERS AND DIRECTORS	OTL Registered Agent signature requ	used when reinstating): DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN
SIGNATURE Signature, typed or printed hamk  12.  Office  President	e of registered agent and title if applicable (N FFICERS AND DIRECTORS DELETE	OTL. Registered Agent signature requ	ured when reinstating): DATE
SIGNATURE  Signature, typed or printed name  12.  OTHER President  Michael  STREET ADDRESS 10447 5 51	e of registered agent and title if applicable (N FFICERS AND DIRECTORS DELETE	OTE Registered Agent signature requirements and	used when reinstating): DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN
SIGNATURE  Signature, typed or printed name  12.  OTHE  President  Michiel  TREET ADDRESS  104425  HTY-ST-ZIP  OC-616,	e of registered agent and title if applicable (N  OFFICERS AND DIRECTORS  T DELETE  A アンマン  スラスへの こ ナ スインスペン	13. 1.1 TITLE 1.2 NAMÉ 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ared when reinstating):  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  Change
SIGNATURE  Signature, typed or printed name  12.  OTHE  President  TWICHUE  STREET ADDRESS  10442 SU  HTY-ST-ZIP  OC. C. C.	e of registered agent and title if applicable (N FFICERS AND DIRECTORS DELETE	OTE Registered Agent signature required.  13.  1.1 THE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 THE	used when reinstating): DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN
SIGNATURE  Signature, typed or printed hams  12.  OTHE  President  Thickurl  TREET ADDRESS  INTY-ST-ZIP  OC. C. C.  ITTLE  IAME	e of registered agent and title if applicable (N  OFFICERS AND DIRECTORS  T DELETE  A アンマン  スラスへの こ ナ スインスペン	OTL Registered Agent signature required.  13.  1.1 THE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-ST-ZIP 2.1 THE 2.2 NAME	ared when reinstating):  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  Change
SIGNATURE  Signature, typed or printed name  12.  O  TITLE  President  Michael  TMichael  STREET ADDRESS  OC. C. C.  STREET ADDRESS  STREET ADDRESS	e of registered agent and title if applicable (N  OFFICERS AND DIRECTORS  T DELETE  A アンマン  スラスへの こ ナ スインスペン	OTE Registered Agent signature required.  13.  1.1 THE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 THE	ared when reinstating):  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  Change
SIGNATURE  Signature, typed or printed name  12.  O  TITLE  President  Michael  TMichael  STREET ADDRESS  OC. C. C.  OC. C. C.  OC. C. C.  OC.	e of registered agent and title if applicable (N  OFFICERS AND DIRECTORS  T DELETE  A アンマン  スラスへの こ ナ スインスペン	OTL Registered Agent a gnature req.  13.  1.1 THE 1.2 NAME 1.3 STREEL ADDRESS 1.4 CHY-ST-ZIP 2.1 THE 2.2 NAME 2.3 STREEL ADDRESS	ared when reinstating):  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  Change
SIGNATURE  Signature, typed or printed name  12.  OTHE  President  Michael  STREET ADDRESS  HTY-ST-ZIP  THE  JAME  STREET ADDRESS  STY-ST-ZIP  THE  JAME  STREET ADDRESS  STY-ST-ZIP	e of registered agent and title if applicable (N  FFICERS AND DIRECTORS  DELETE  A Rizzo  T J J J J J J J J J J J J J J J J J J	OTL Registered Agent agnisture req.  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP	used when reinstating):  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  Change ☐  Change ☐
SIGNATURE  Signature, typed or printed name  12.  O  ITLE  President  Michiel  Micho	e of registered agent and title if applicable (N  FFICERS AND DIRECTORS  DELETE  A Rizzo  T J J J J J J J J J J J J J J J J J J	13.   1.1 TILE   1.2 NAME   1.3 STREET ADDRESS   1.4 CITY - ST - ZIP   2.1 TILE   2.2 NAME   2.3 STREET ADDRESS   2.4 CITY - ST - ZIP   3.1 TILE   3.2 NAME   3.3 STREET ADDRESS   3.4 CITY - ST - ZIP   3.5 TREET ADDRESS   3.5	used when reinstating):  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  Change ☐  Change ☐
SIGNATURE  Signature, typed or printed name  ITLE  President  Michael  Fither Address  Sity-st-zip  TILE  IAME  IA	e of registered agent and title if applicable (N  IFFICERS AND DIRECTORS  T DELETE  A アンマン  ストリンナ  ストリント  DELETE	13.   1.1 TILE   1.2 NAME   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP   2.1 TILE   2.2 NAME   2.3 STREET ADDRESS   2.4 CITY-ST-ZIP   3.1 TILE   3.2 NAME   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP   3.1 TILE   3.2 NAME   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP   3.1 TILE   3.2 NAME   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP   3.1 TILE   3.2 NAME   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP   3.1 TILE   3.2 NAME   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP   3.1 TILE   3.2 NAME   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP   3.1 TILE   3.1 TILE   3.1 TILE   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP   3.1 TILE   3.1 TILE   3.1 TILE   3.1 TILE   3.3	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN Change Change Change Change Change
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SIGNATURE  Signature, typed or printed name  IZ.  O  ITLE  President  Michiel  Nichiel  Nichiel  Nichiel  Nitreet Address  O  O  Color  ITLE  ITLE  IAME  STREET ADDRESS  OITY-ST-ZIP  ITLE  IAME  STREET ADDRESS  OITY-ST-ZIP  ITLE  IAME  STREET ADDRESS  OITY-ST-ZIP  ITLE  IAME  STREET ADDRESS  STY-ST-ZIP  ITLE  IAME  STREET ADDRESS  STREET ADDRESS	e of registered agent and title if applicable (N  IFFICERS AND DIRECTORS  T DELETE  A アンマン  ストリンナ  ストリント  DELETE	13.   1.1 TOLE   1.2 NAME   1.3 STREET ADDRESS   1.4 CITY - ST - ZIP   2.1 TOLE   2.2 NAME   2.3 STREET ADDRESS   2.4 CITY - ST - ZIP   3.1 TOLE   3.2 NAME   3.3 STREET ADDRESS   3.4 CITY - ST - ZIP   4.1 TOLE   4.2 NAME   4.2 NAME   4.3 NA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN Change Change Change Change Change
SIGNATURE  Signature, typed or printed name  12.  O  ITLE  President  Michiel  Michiel  ITLE  ITTLE  ITTLE  IAME  STREET ADDRESS  SITY-ST-ZIP  ITLE  IAME  STREET ADDRESS  SITY-ST-ZIP	e of registered agent and title if applicable (N  IFFICERS AND DIRECTORS  T DELETE  A アンマン  ストリンナ  ストリント  DELETE	13.   1.1 TOLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN Change Change Change Change Change
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SIGNATURE Signature, typed or printed name  12.  OTHER President NAME TMICHUEL STREET ADDRESS 104425	DELETE  DELETE  DELETE  DELETE	13.   1.1 TOLE	ared when reinstating):  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  Change  Change  Change  Change

SIGNATURE: MICHASICALAR 1835 111 421 (1) (1) 4-15-97 352-231-426