

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

FILED  
Apr 03 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P96000099864 (6)

1. Corporation Name  
DP ASSET MANAGEMENT, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
160 SOUTH UNIVERSITY DRIVE  
SUITE B  
PLANTATION FL 33324

Mailing Address  
160 SOUTH UNIVERSITY DRIVE  
SUITE B  
PLANTATION FL 33324

2. Principal Place of Business

21 7100 W. Camino Real

Suite, Apt. #, etc.

22 SUITE 115

City & State

23 BOCA RATON FL

Zip

24 33433

Country

25 US

2a. Mailing Address

26 7100 W. Camino Real

Suite, Apt. #, etc.

27 115

City & State

28 BOCA RATON FL

Zip

29 33433

Country

30 US

3. Date Incorporated or Qualified

12/11/1996

4. FEI Number 65-0721384

APPLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

HENDERSON, PAUL T JR  
160 SOUTH UNIVERSITY DRIVE  
SUITE B  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name PAUL T. HENDERSON, JR.

82 Street Address (P.O. Box Number is Not Acceptable)

7100 W. Camino Real

83 SUITE 115

84 City BOCA RATON

FL

85 Zip Code 33433

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/15/98

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE

NAME HENDERSON, PAUL T JR  
STREET ADDRESS 160 S UNIVERSITY DR #B  
CITY-ST-ZIP PLANTATION FL

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

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

1.1 TITLE P ☒ Change ☐ Addition

1.2 NAME PAUL T HENDERSON JR  
1.3 STREET ADDRESS 7100 W. CAMINO REAL #115  
1.4 CITY-ST-ZIP BOCA RATON FL 33433

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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, 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 an attachment with an address.

SIGNATURE:

4/15/98

561-417-9100

CR2E034 (10/97)