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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 31 1998 8:00am

Secretary of State

3/1/98

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700002088 (7)

DLFN	MANAGEMENT SERVICES,	INC.)
	V			
Principal Place		Mailing Address		a laminar i im latti mati mati mati mati mati mati mati
	ERSITY DRIVE #201	7800 N. UNIVERSITY DRI	VE #201	
TAMARAC FL	33321	TAMARAC FL 33321		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				01/02/1997
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		65-9720157 Not Applicable
Suite, Apt. ₩, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22		27		Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	28 ZID	Country	
24	25	29	30	R. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
[64]	9. Name and Address of Curre		190	10. Name and Address of New Registered Agent
FRIEDMAN, DAVID L 81 Name REX D 200 CC				
7800 N. UNIVERSITY DRIVE #201			82 Street	Address (P.O. Box Number is Not Acceptable)
	AARAC FL 33321		dz Street	Address (P.O. Box Number is Not Acceptable)
			83	
			24 00	suite rol
			84 City	TAMARAC FL 85 Zip Code
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 florit, in the State of Elerida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, truth accept the obligations of Section 607.0505, Florida Statutes.				
100 11 100				
SIGNATURE Signature typing or presend happend registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE				
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	L] DELETE	1.1 TITLE	DIRICK M. MORNE Change Addition Thomasac PC 33541
NAME	FRIEDMAN, DAVID L		1.2 NAME	SPAN H. UNIVERVITA
STREET ADDRESS	8441 NW 26TH DRIVE		1.3 STREET ADDRESS	T4 OV 3224.
CITY-S1-ZIP	CORAL SPRINGS FL 33065	Document.		
TITLE		☐) DELETE	2.1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP TITLE		DELETE	2. 4 CITY - ST - ZIP 3 1 TITLE	Change Addition
		E-1 DELETE		Citatings — Addition
NAME CARGO ARROGGO			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	Change Addition
NAME			4. 2 NAME	J Shange C Assert
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
THLE		DELETE	5.1 THILE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	
14. I hereby c	ertify that the information supplied v	vith this filing does not qualify for	or the exemption state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated of officer or o	on this annual report or supplement director of the corporation or the rec	al annual report is true and acc eiver or trustee empowered to	curate and that my sig execute this report as	gnature shall have the same legal effect as if made under oath; that I am an specified by Chapter 607, Florida Statutes; and that my name appears in
officer or director of the corporation or the receiver of 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 establishment with an address.				