1999



ELORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90226 049 \*\*\*150.00

## DOCUMENT # P97000014665 1. Corporation Name

DJ'S UNLIMITED, INC.

Principal	Place	of	Business
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1351 NW 87TH LANE

Mailing Address 1351 NW 87TH LANE



PLANTATION FL 33322 PLANTATION FL 33322			DO NOT WRITE IN THIS SPACE					
e de la companya del companya de la companya del companya de la co					Incorporated or Qualifed 2/1997			
2. Principal Place of Business	2a. Mailing Add	ress		4. FEI N		~	Applied For	
21	26			65-0	730955		Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #	t, etc.		\	cate of Status Desired		75 Additional se Required	
City & State	City & State	•			on Campaign Financing Fund Contribution	•	.00 May Be Ided to Fees	
Zip Country	Zip 29	30	intry	**	corporation owes the current year and Property Tax.	Intangible Yes	3.4	
9. Name and Address of Current Registered Agent				10. Name	10. Name and Address of New Registered Agent			
CACC DANIEL C			81	Name				
GASS, DANIEL G 10001 NW 50TH STREET #204		82	2 Street Address (P.O. Box Number is Not Acceptable)					
SUNRISE FL 33351			83					
			84	City		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 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition DELETE 11 TITLE TITLE PALAU, FRANCISCO 1.2 NAME NAME 1351 NW 87TH LANE 1.3 STREET ADDRESS STREET ADDRESS PLANTATION FL 33322 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE Change 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ∏ DELETE ☐ Change 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Addition ☐ Change DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE ☐ Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADORESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition 6.1 TITLE Change □ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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 or the recover 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 nt with an address, with all other like empowered.

SIGNATURE:

FRE REQUIRED

CR2E034\_(11/98)