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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P97000019144 (9)

DANCE AMERICA INTERNATIONAL, INC.

FILED May 08 1998 8:00am Secretary of State



Principal Place	e of Business	Maiing A	Maiing Address							
1978 S TAMI/ VENICE FL 34	AMI TRAIL, NOS. 5 AND 6 1293		1978 S TAMIAMI TRAIL. NOS. 5 AND 6 VENICE FL 34293				DO NOT WRITE IN	I THIS SP	ACF	
							3. Date Incorporated or Qualified			
							02/24/1997			
6 Delegand Di	ace of Business	T 9a Moile	a Addross				4. FEI Number			pplied For
<u> </u>	Mace of Business	├ ──	2a. Mailing Address				65-0748635			ot Applicable
21	9	[26]	Suite, Apt. #, etc.				85 - 0778630			Additional
Suite, Apt.	W, BIC.	├ ── ┐					5. Certificate of Status Desired		- - · · · -	equired
City & State		27]	City & State				• Starting Committee Signature			
·	9	<u></u>	├ ─ '				6. Election Campaign Financing Trust Fund Contribution	\supset		May Be to Fees
23 Zip	Country	28 Zip		Countr	rv			_		
				30			This corporation owes or has paid Personal Property Tax due June 30			No :
24	25 Name and Address of Curr	29	Scient	130			10. Name and Address of New Regis			
		on nogatorous	· gont	81	I Na	me				
	BIEN, WAYNE J	\P								
	15 TUSKAWILLA RD, SUITE 10	15			82 Street Add		ss (P.O. Box Number is Not Acceptable))		
WI	NTER SPRINGS FL 32708			83	2					··
				**	ا ا					
				84	4 Cit	ly			85 Zip	Code
					<u></u>			FL	Ц	
11. Pursuant t	to the provisions of Sections 607.0	502 and 607.150 ste of Florida, Suc	8, Florida Statu sh changa was	ites, the abov authorized b	ve-nar nv the	med corpo corporatio	oration submits this statement for the pur on's board of directors. I hereby accept t	pose of c he appoi	nanging i ntment as	its registered registered
agent. I a	m familiar with, and accept the ob	ligations of, Secti	on 607.05 0 5, F	lorida Statute	es.	***	,	.,		Ĭ
SIGNATURE										
	Signature, typed or printed name of registered				gent sign	nature required	d when reinstating)	DATE		
12.		AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICE			
TITLE	D		DELETE	1.1 TITLE					Change	Addition
NAME	WINTERS, MARLENE K			1.2 NAME	ŧ					
STREET ADDRESS	1978 S TAMIAMI TRAIL, NO)S. 5 AND 6		1.3 STREE	ET ADDR	ES\$				
CITY-ST-ZIP	VENICE FL 34293			1.4 CITY-	ST-ZIP					
TITLE	0		DELETE	2.1 TITLE				F	Change	☐ Addition
NAME	HAIRE, BARL			2.2 NAME	E					
STREET ADDRESS	1978 s-7am iami trail, no	OS. 5 AND 6		2.3 STREE	E1 ADDR	RESS				
CITY+ST-ZIP	VENICE FL 34293			2. 4 CITY	-ST-ZIP	,				
TITLE			DELETE	3.1 TITLE					Change	☐ Addition
NAME				3.2 NAME	E					
STREET ADDRESS				3.3 STREE	E1 ADDR	RESS				
CITY-ST-ZIP				3.4. CITY						
TITLE			DELETE	4.1 TOTLE					Change	Addition
NAME				4. 2 NAM	iF					
STREET ADDRESS				4.3 STRE		RESS				
				4.4 CITY-						
CITY-ST-ZIP TITLE			DELETE	5.1 TITLE			بد		Change	■ Addition
				5.2 NAME				_	•	_
NAME OTOECT ADDRESS						aree				
STREET ADDRESS				5.3 STRE						
CITY-ST-ZIP		·	DELETE	5.4 City -		<u></u>		· · ·	Change	Addition
TITLE				6 1 TITLE					Onange	L. NOUIDUI
NAME				6.2 NAMI						
STREET ADDRESS				6.3 STRE	et addr	RESS				
CITY-ST-ZIP				6.4 CITY	- ST - ZIP	<u> </u>				

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 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.