PROFIT **CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 08, 1999 8:00 am Secretary of State 04-08-1999 90089 040 ***150.00

DOCUMENT #	P97000020534
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DANNY	IMPORT EXPORT INC.						18 8 (2) 18 2 (2) 18 2)
		Mail-Address				OOMB MAII BOILL DI	IBB ININ BIBI 1981
•	ncipal Place of Business Mailing Address						
4200 Sheridan St. #401 4200 Sheridan St. #401 Hollywood Fl 33021 Hollywood Fl 33021		·					
TIDELT THOOP	£ 550£1				DO NOT WRITE IN 1	THIS SPACE	
					3. Date incorporated or Qualifed		}
	·	1			03/05/1997 4. FEI Number		nation Fac
2. Principal Pi	ace of Business	 -		38-3323449		Applied For Not Applicable	
21		26 Suite Ast # etc		30-3323448		Additional	
Sulte, Apt.	#, elc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	• • •	Required	
City & State		City & State		6. Election Campaign Financing	\$5.0	D May Be	
23		28		Trust Fund Contribution		t to Fees	
Zip	Country	Zip	Cot	untry	8. This corporation owes the current year	ır Intangible	
24	25	29	30	,	Personal Property Tax.	Yes	□No
	9. Name and Address of Current	Registered Agent		<u> </u>	10. Name and Address of New Registe	red Agent	
11110	OCH VACCIME			81 Name			
	SEIN, YASSINE	,		82 Street A	ddress (P.O. Box Number is Not Acceptable)		
	COUNTY LINE RD LYWOOD FL 33023						
. ਜਹ	L1WOOD FL 33023			83		•	
	_			84 City		FL 85 Zir	Code
	6 - 607.050	and covered Charles De	tulos the s	have samed a		é -bi i	ts registered
11. Pursuant	egistered agent, of both, in the State (of Florida, Such change wa	s authorize	d by the corpor	orporation submits this statement for the purpos ation's board of directors. I hereby accept the a	ppointment as	registered
agent. I a	m familiar with, sind accept the obligat	ions of, Section 607.0505,	Florida Stat	lutes.	April 27,	1909	.
SIGNATURE	Signature Specific printed name of registered agent	and title if applicable. (N	OTE: Registerer	d Agent signature req	ulred when reinstating) HPR1 / ~ //	<u> </u>	
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFICER		ORS IN 12
TITLE	DP /	☐ DELETE	1.1 Ti	ITLE		Change	Addition : 💳
NAME	Yassine, Hussein						
STREET ADDRESS			12 N	AME			,
3 NEEL POOR CON	4200 SHERIDAN ST. #401			TREET ADDRESS			25034
CITY-ST-ZIP	4200 SHERIDAN ST. #401 HOLLYWOOD FL 33021		1,3 S 1,4 C	TREET ADDRESS			R2E034.
i I	•	DELETE	1,3 S 1,4 C 2,1 T	TREET ADDRESS TTY-ST-ZIP TILE		☐ Change	Addition C
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CITY-ST-ZIP	•	☐ DELETE	1.3 \$ 1.4 C 2.1 T 2.2 N 2.3 \$	TREET ADDRESS ITY-ST-ZIP ITLE IAME TREET ADDRESS			Addition 2
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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 supplementally annual report is true and accurate and that my signature shall have the same legal effect as if made under coath; that I am 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 changes or on an attachment with an address, with all other like empowered.

SIGNATURE:这