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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90244 013 ***150.00

DOCUMENT # P97000024177

1. Corporation Name

DBS DESIGN CENTERS, INC.

| Princ | ipal Place of Busine |
|-------|----------------------|
| 12851 | METRO PARKWAY |
| FORT | MYERS EL 33912 |

Mailing Address

12851 METRO PARKWAY FORT MYERS FL 33912



| | | • | | | DO | NOT WRITE IN THIS | SPACE | |
|---------------------|--|--|-------------------------|---|---------------------------------------|-------------------------|--------------|--|
| | | | | | 3. Date incorporated or | Qualifed | | |
| | | | | | 03/12/1997 | | | |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | _ | | 4. FEI Number | | Ap | plied For |
| 21 | | 26 | | | 65-075 19 19 | | No | t Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | E Oudificate of Chatron I | Desired \square | \$8.75 | Additional |
| 22 | | 27 | | | 5. Certifcate of Status I | Jesired 🔲 | Fee Re | equired |
| City & State | | City & State | | | 6. Election Campaign F | inancing - | \$5.00 | May Be |
| 23 | | 28 | | Trust Fund Contribut | ion | Added 1 | lo Fees | |
| Zip | Country | Zip | Co | untry | 8. This corporation owe | es the current year Int | angible | |
| 24 | 25 | 29 | 30 | | Personal Property Ta | | Yes | □No |
| ==1 | 9. Name and Address of Curren | | | | 10. Name and Address | of New Registered | Agent | |
| | | | | 81 Name | | | | |
| BELL | ., Greg | | | 22 0: 1111 | (D.O. D. M t t- M | -4 At-bl-\ | | |
| 12851 METRO PARKWAY | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | |
| FORT MYERS FL 33912 | | | | 83 | | | | |
| | | | | | | | | |
| | | | | 84 City | | FL | 85 Zip (| Code |
| \ | | | | | | | ahanging ita | registered |
| 11. Pursuant t | to the provisions of Sections 607.050 egistered agent, or both, in the State | 2 and 607.1508, Florida Statu of Florida. Such change was a | tes, the a authorize | above-named cort d by the corporati | on's board of directors. I her | eby accept the appoi | ntment as re | gistered |
| agent. I ar | m familiar with, and accept the obliga | tions of, Section 607.0505, Fl | orida Sta | tutes. | | | | |
| SIGNATURE | | | | | | | | |
| | Signature, typed or printed name of registered ager | | | d Agent signature require | ed when reinstating) ADDITIONS/CHANGE | DATE | D DIDECTO | NDC IN 12 |
| 12. | | ID DIRECTORS | 13. | | ADDITIONS/CHANGE | 10 OFFICERS AN | ☐ Change | Addition |
| TITLE | PD SIFTERON FOWARD II | ☐ DETEIE | 1.1 T | | | | □ Criainge | |
| NAME | DIETRICH, EDWARD H | | | AME | | | | |
| STREET ADDRESS | 19780 118 TRAIL SOUTH | | 138 | TREET ADDRESS | | | | |
| CITY-ST-ZIP | BOCA RATON FL 33498 | | _ | ITY-ST-ZIP | | | | — • • • • • • • • • • • • • • • • • • • |
| TITLE | VD | ☐ DELETE | 2.1 T | ITLE | | | ☐ Change | ☐ Addition |
| NAME | wan zenbe rg, Bradley e | | 2.2 N | AME | | | | ţ |
| STREET ADDRESS | 906 SE 11TH STREET | | 2.3 S | TREET ADDRESS | | | | |
| CITY-ST-ZIP | DEERFIELD BEACH FL 33441 | | 2.40 | CITY-ST-ZIP | | | | |
| TITLE | STD | ☐ DELETE | 3.1 T | ITLE | | | Change | ☐ Addition |
| NAME | DIETRICH, PATRICIA A | | 3.2 N | AME | | | | Ì |
| STREET ADDRESS | 19780 118 TRAIL SOUTH | | 338 | TREET ADDRESS | | | | j |
| CITY-ST-ZIP | BOCA RATON FL 33498 | | 34 (| CITY-ST-ZIP | | | | ł |
| TITLE | 55077151161112 00 100 | ☐ DELETE | 4.1 T | | | | ☐ Change | Addition |
| NAME | | | 4.2 | NAME | | | | 1 |
| - | | | | TREET ADDRESS | | | | Ì |
| STREET ADDRESS | | | | TY-ST-ZIP | | | | |
| CITY-ST-ZIP | | ☐ DELETE | 4.4 C | | | | Change | Addition |
| TITLE | | | 5.2 N | | | • | | |
| NAME | | | | TREET ADDRESS | | | | |
| STREET ADDRESS | | | | | | | | 1 |
| CITY-ST-ZIP | | □ oc: === | | ITY-ST-ZIP | | | Change | Addition |
| TITLE | | ☐ DELETE | 6.1 7 | | | | ∪nange | |
| NAME | | | 6.2 N | | | | | Į |
| STREET ADDRESS | | | 6.3 8 | TREET ADDRESS | | | | ď |

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 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.

FEB. 16,1999