Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90260 008 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000032060

1. Corporation Name

DEDCOMAL TOLICH DUOTOGDADHY INC

renson	ML 1000R FROTOGRAFII	it, itt	<i>)•</i>									
Principal Place of Business Mailing Address							# 1881188t tra coust landt abust auter deur deter			itii na it (ta		
1045 S.E. 15TH STREET. #13-B FT. LAUDERDALE FL 33316 FT. LAUDERDALE FL 33316							DO NOT WRITE IN THIS SPACE					
							3. Date Incorporated or Qualifed 04/07/1997		,			
2. Principal Place of Business			2a. Mailing Address				4. FEI Number			ied For		
21			26				65-0737316 Not Applicable				-	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired		-	lditional	l	
22			27							uired	1~	
City & State			City & State				6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees					
Zip	Zip Country		Zip Cou				8. This corporation owes the current year Intangible					
24	25 29		:	30			Personal Property Tax.			X Yes □ No		
	9. Name and Address of Curre	nt Regis	stered Agent		_		10. Name and Address of New Registered	d Agent			-	
0.11	TOOLIOOOO LEONADD			81	1	Name						
SANTOSUOSSO, LEONARD					2	Street Address (P.O. Box Number is Not Acceptable)				1		
1045 S.E. 15TH STREET, #13-B FT. LAUDERDALE FL 33316					1	<u> </u>					4	
F1. 1	AUDENDALE PL 33316			83	3		` .					
					4	City	F	85	Zip Co	ode	1	
office or n agent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	a of Flore	da. Such change was au	inonzea by	VΨ	-named corpo he corporation	ration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing ointment a	g its regi	egistered stered		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered						signature required] ;	
12. OFFICERS AND DI							ADDITIONS/CHANGES TO OFFICERS AND I				- !	
TITLE	D		☐ DELETE	1,1 TITLE				☐ Chai	nge	☐ Addition		
NAME	SANTOSUOSSO, LEONARD			1.2 NAME							1	
STREET ADDRESS						ADDRESS] !	
CITY-ST-ZIP	FT. LAUDERDALE FL 33316			1.4 CITY-5		ZIP		☐ Chai	nge -	Addition	-	
TITLE			L'I DEFEIE	21 TITLE					iigo			
NAME				2.2 N/9ME		*DDDCCC						
STREET ADDRESS				2.3 STREE							: =-	
CITY-ST-ZIP			☐ DELETE	2,4 CITY- 3,1 TITLE		- 217		☐ Chai	nge	Addition	1	
TITLE			C OCCC, C	3.7 THEE				_	•	_		
NAME				3,3 STREE		ADDRESS						
STREET ADDRESS				3.4. CITY-			•					
CITY-ST-ZIP TITLE	<u> </u>		☐ DELETE	4,1 TITLE				☐ Cha	nge	☐ Addition	1	
NAME				4, 2 NAME								
STREET ADDRESS				4,3 STREE		ADDRESS						
CITY-ST-ZIP				4,4 CITY-1								
TITLE			☐ DELETE	5.1 TITLE				Cha	nge	☐ Addition	1	
NAME				5.2 NAME								

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 chapter or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

61 TITLE

6.2 NAME

☐ DELETE

2/26/99

Change

☐ Addition