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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P970

1. Corporation Name

DOVCO ENTERPRISES II, INC. P97000045798 (0)

FILED Feb 13 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address	Mailing Address					• 10101 1011 1001	
3900 INDIANT	OWN ROAD	3900 INDIANTOWN RO	3900 INDIANTOWN ROAD						
\$UITE #607		SUITE #607							
JUPITER FL 33477		JUPITER FL 33477				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
						05/21/1997			
	ace of Business	2a. Mailing Address				4. FEI Number		Applied For	
21		26				65-116145-		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			Certificate of Status Desired		5 Additional	
22		27				S commence of States Session	Fee	Required	
City & State		City & State	City & State			6. Election Campaign Financing	\$5.0	00 May Be	
23		28				Trust Fund Contribution	Add	ed to Fees	
Zip	Country	Zip	Country			8. This corporation owes or has paid the	current year	Intangible	
24	25	29	30	30		Personal Property Tax due June 30.	Yes	□ No	
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registe	red Agent		
	LEEL, KENNETH M P.A.		Įŧ	B1 N	lame			ļ	
555 NORTH CONGRESS AVENUE				B2 S	treet Addres	t Address (P.O. Box Number is Not Acceptable)			
	ITE 301		or greet Au			doress (1.0. box humber is not Acceptable)			
ВО	YNTON BEACH FL 33426		[8	B3					
			ļ.,		N:4		1 -		
			l,	84 C	City		FI ⁸⁵ ²	ip Code	
11. Pursuant t	o the provisions of Sections 607.050.	2 and 607 1508. Florida Stati	utes, the abo	ove-na	améd corpor	ration submits this statement for the nurno	se of changin	a its registered	
office or re	egistered agent, or both, in the State	of Florida, Such change was	authorized	by the	e corporatio	n's board of directors. I hereby accept the	appointment	as registered	
	manina with and accept the dung.	mons or, accuented 1.0505, i	riorida Statu	IBS.					
SIGNATURE	Signature, typod or pented name of registered age	of end title dance able (NC	OTE: Bogistered	Apen) si	onature required	when reinstating)	TE		
12.	OLFICERS AND	F	13.			ADDITIONS/CHANGES TO OFFICERS		ORS IN 12	
TITLE		DELETE	1.1 1111	E	10	YP, S	Chang		
NAME	TOWE, DAVID		1.2 NAM	AF.	7	(1)	_ `	, <u></u>	
STREET ADDRESS	3900 INDIANTOWN ROAD				NDESS				
CITY-ST-ZIP	JUPITER FL 33477			1.3 STREET ADDRESS 1.4 CITY-ST-ZIP					
TITLE	0	DELETE	2.1 TITL		0	77	Le Chanc	e Addition	
NAME	TOWE, DONNA		22 NAME		_ ′ン	1) 2		,	
STREET ADDRESS	3900 INDIANTOWN ROAD			23 STREET ADORESS				l	
	JUPITER FL 33477		1	2 4 CITY - ST-ZIP		,			
CITY-ST-ZIP TITLE		☐ DELETE	3.1 TITL		IP		Chanc	e Addition	
				-				NOUIDON .	
NAME			3 2 NAM						
STREET ADDRESS			3 3 STR						
CITY-ST-ZIP		T DELETE	3.4. DIT		IP .			. Tagger	
TITLE		☐ DELETE	4 1 TITU				Chang	ge 🔲 Addition	
NAME			4. 2 NAM					ŀ	
STREET ADDRESS			4.3 STR	EET ADD	IRESS			ļ	
CITY - ST - ZIP			4.4 CITY		P				
TITLE		☐ DELETE	5.1 TITL				☐ Chang	e Addition	
NAME			5.2 NAM	AE.					
STREET ADDRESS			5 3 STAI	EET ADD	ress				
CITY-ST-ZIP			5 4 CITY	-ST-ZIF	P				
TITLE		DELETE	6.1 TITU	E		·	Chang	e Addition	
NAME			6.2 NAM	AE.				ļ	
STREET ADDRESS			6 3 STRI		RESS				
CITY-ST-ZIP			6.4 CITY						
0(1)1-01-2IF			0.4 CHY	- 31 - 21	1 1 2	440 09/043 - 51-1-1-0-1-1-1-1			

indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic 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 any attachment with an address.