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**

FILED May 03, 1999 8:00 am Secretary of State

05-03-1999 90036 039 ***150.00

DOCUMENT # P9700048514 D.X.A. INC.					1 (44) (44) (44) (45) (45) (45) (45) (45)	14 00 1 1 010 1 0 111	AT MANI ATAK PARI
	<u> </u>						
Principal Place	e of Business	Mailing Address		~~	is infinitely transfer and a series again again again a	-	
128 NW 25 ST 128 NW 25 ST MIAMI FL 33127 MIAMI FL 33127							
					DO NOT WRITE IN THIS SPACE		
					3. Date incorporated or Qualifed		
					06/03/1997		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		pplied For
21 26					65-0758048		lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	•	Additional Required
22 27 City 8 State							
·	City & State				6. Election Campaign Financing Trust Fund Contribution		May Be
23 Zip	28 Zip Country Zip Cou				8. This corporation owes the current year Into		
24	25	29 30	_ `		Personal Property Tax.	Yes	No
•	'9. Name and Address of Curr				10. Name and Address of New Registered	Agent	
			81	Name			
	RLING, ANA		82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
830 W 54 ST							
HIAL	EAH FL 33012		83				[
	,		84	City		85 Zip	Code
				L	FL poration submits this statement for the purpose of	1 1 1	
office or r agent. I a SIGNATURE	Signature, typed or printed harrie of registered	agent and title if applicable. (NOTE: Regi	stered Age		oration submits this statement for the purpose of on's board of directors. I hereby accept the appoin ad when reinstating)		
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	Change	
TITLE	DP ANA	DELETE	1.1 TITLE				
NAME ·	O'ETENO, AUG		1.2 NAME	T ADDRESS			j
STREET ADDRESS	300 11 51 51		1.4 CITY-S				
CITY-ST-ZIP TITLÉ	, 14 12 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		2.1 TITLE			☐ Change	Addition
NAME	D31		2.2 NAME				ļ
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP			2. 4 CITY-	i	•		
TITLE			3.1 TITLE	72		Change	Addition
NAME .			3.2 NAME				{
STREET ADORESS			3.3 STREE	TADORESS	· <u>*</u>		Ì
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4.2 NAME				}
STREET ADDRESS	,			TADDRESS			1
CITY-ST-ZIP	-	□ Delete	4.4 CITY-S	T-ZIP		[_] Channe	Addition-
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NAME .				T ADDRESS	•	*	İ
STREET ADDRESS			5.4 CITY-S		. 26.4	*,•	
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				}
STREET ADORESS			6.3 STREE	TADDRESS			
CITY-ST-ZIP	•		6.4 CITY-S	T-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 changed, or on an attachagent with an address, with all other like empowered.

SIGNATURE: