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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000050530 (9) DK COMPLITER CONSULTANTS INC

## **FILED** Feb 23 1998 8:00am Secretary of State

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17	1×A	DUISUNS /	Tuc	ic							
Principal Plac 5161 NW 81 LAUDERHILL	TERRACE	S	516	Mailing Address 5161 NW 81 TERRACE LAUDERHILL FL 33351							iii ggir year
								<u>_</u>	DO NOT WRITE IN THIS	SPACE	
								3.	Date Incorporated or Qualified 06/06/1997		
2. Principal P	Place of Busin	ness	2a. N	Mailing Address					FEI Number	Aı	pplied For
21			26						65-0774495		ot Applicable
Suite, Apt.	#, etc.		<del></del>	Suite, Apt. #, etc.				5.	Certificate of Status Desired		Additional equired
City & Stat	te			City & State				6	Election Campaign Financing		May Be
23			28	•					Trust Fund Contribution		to Fees
Zip		Country	Z	ip.	<b>├</b> ──	untry		8.	This corporation owes or has paid the cu		
24		and Address of Co	29		30	т			Personal Property Tax due June 30.  Name and Address of New Registered		No
	G, DONNA		Titelit Hefirster	ien Wäsur		81	Name	10.	Hame and Address of New Registered	Agent	
	81 NW 81 1										
	UDERHILL I			82 Street Ac			Street Addre	Idress (P.O. Box Number is Not Acceptable)			
_,,		_ 0000				83			, , , , , , <del>, , , , , , , , , , , , , </del>		
						84	City			<b>85</b> Zip	Code
		- <del></del>							F <u>l</u>		
office or r	registered ag	ions of Sections 607 lent, or both, in the t th, and accept the c	State of Florida.	. Such change wa	ıs authorize	id by	the corporation	oration on's bi	a submits this statement for the purpose open of directors. I hereby accept the ap	of changing if pointment as	ts registered registered
SIGNATURE	Signature typed	or printed name of register	ud prient aud title if p	opplicable (A	IOTE: Banistari	nd Arie	int signature required	d when I	reinstating) DATE		
12,	organiare, typica		AND DIRECT		13.	or refe	int administration		DDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	3S IN 12
TITLE	D			DELETE	1.1 T	ITLE				Change	☐ Addition
NAME	KING, D				1.2 N	IAME	ĺ				
STREET ADDRESS		V 81 TERRACE			1.3 S	TREET	ADDRESS				
CITY-ST-ZIP	LAUDEH	HILL FL 33351	·	DELETE	1,4 C	ITY-S	T-ZIP			Change	Addition
TITLE NAME					2.1 s					Change	Addition
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP						CITY-S					
TITLE				DELETE	3.1 T					Change	Addition
NAME	İ				3.2 N	AME					
STREET ADDRESS					3.3 5	TREET	ADDRESS				
CITY-ST-ZIP				DELETE		CITY-S	IT-ZIP			Change	Addition
TITLE NAME				_ Ottell	4.1 T	NAME				Criange	Addition
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP						ITY-S					
TITLE		·		DELETE	5.1 T					Change	☐ Addition
NAME					5.2 A	AME					
STREET ADDRESS					5.3 S	TREET	ADDRESS				
CITY-ST-ZIP				DC) CYC		ITY-S	T-ZIP			1 0	10000
TITLE				☐ DELETE	6.1 T				6000024385	Change	Addition
NAME CTOCET ADORESC					6.2 N		ADODESS		<b>6000024385</b> ! -02/24/98010080	29 🐧	1073
STREET ADORESS CITY-ST-ZIP	·					IREET ITY-S1	ADDRESS		***150.00		1200
14. I hereby o	certify that the	e information supplie	ed with this film	g does not qualify	for the ex	empl	ion stated in S	ection	n 119.07(3)(i), Florida Statutes. I further c	ertify that the	information
indicated officer or i	on this annu director of th	al report or supplen	nental annual re receiver or tru	eport is true and a stee empowered t	iccurate an	d tha	at my signature	shall :	I have the same legal effect as if made ul y Chapter 607, Florida Statutes; and that	nder oath; tha	atlam an