

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra S. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000055250 (9)

1. Corporation Name

DJP HOLDINGS, INC.

Principal Place of Business

Mailing Address

~~415 COCONUT ISLE~~
~~FT. LAUDERDALE FL 33301~~

~~415 COCONUT ISLE~~
~~FT. LAUDERDALE FL 33301~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 P.O. Box 22262

Suite, Apt. #, etc.

22

City & State

23 Lake Buena Vista, FL

Zip

24 32830

Country

2a. Mailing Address

26 P.O. Box 22262

Suite, Apt. #, etc.

27

City & State

28 Lake Buena Vista, FL

Zip

29 32830

Country

30

3. Date Incorporated or Qualified

06/23/1997

4. FEI Number

59-3510737

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

Yes No

9. Name and Address of Current Registered Agent

~~CORPORATION SERVICE COMPANY~~
~~1201 HAYS STREET~~
~~TALLAHASSEE FL 32301~~

10. Name and Address of New Registered Agent

81 Name

Donald J. Proietto

82 Street Address (P.O. Box Number is Not Acceptable)

5200 WATER VISTA DRIVE

83

84 City

ORLANDO

FL

85 Zip Code

32821

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Donald J. Proietto

Signature typed or printed name of registered agent and if not applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

6/19/98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PROIETTO, DONALD J
STREET ADDRESS ~~415 COCONUT ISLE~~
CITY - ST - ZIP ~~FT. LAUDERDALE FL 33301~~

TITLE ☐ DELETE

NAME PROIETTO, LOUIS D
STREET ADDRESS ~~415 COCONUT ISLE~~
CITY - ST - ZIP ~~FT. LAUDERDALE FL 33301~~

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

☒ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

P.O. Box 22262-IV/A
LAKE BUENA VISTA, FL 32830

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

4800 NE 10 AVENUE
FT. LAUDERDALE, FL 33304

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

200002570182--0
-06/23/98-01090-021
***558.75 ***558.75

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 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; 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 attachment with an address.