## 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** # P97000060859 (0)

**DOMINEX NATIONAL CORPORATION** 

Principal Place of Business

Mailino Address

**FILED** Apr 29 1998 8:00am Secretary of State



7303 NW 56T SUITE 33502 MIAMI FL 331		7303 NW 56TH STREET SUITE 33502 MIAMI FL 33166		DO NOT WRITE IN THIS  3. Date Incorporated or Qualified  07/11/1997	SPACE
2. Principal Pi	Jace of Business	26. Mailing Address	156st	4. FEI Number AND Vicaly	Applied For Not Applicable
Suite, Apt	*5°502	Suite, Apt. 1, etc.	2	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stafe	1A(1)	28 City & State 1 6 K	(IDA)	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
21/3/3/	66 25 Country	295-166 3t	Country		Yes No
EIN	9. Name and Address of Current IANCIAL FOUNDATIONS, INC.	Registered Agent	81 Name	10. Name and Address of New Registered	Agent
2843 THAXTON DRIVE, #37 PALM HARBOR FL 34684			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
			83		
			84 City	FL	85 Zip Code
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 Stategof Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar withy and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE					
12.	Signature, typod or printed name of registered agent OFFICERS AND		egistered Agent signature requ	uirod when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	P OFFICERS AND	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	NOWAK, MAREK		1.2 NAME		
STREET ADDRESS	7303 NW 56TH STREET		1.3 STREET ADDRESS		
City-St-ZIP	MIAMI FL 33166		1.4 CITY - ST - ZIP		1
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		j
TITLE		☐ DEL <b>e</b> te	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS	•	ĺ
CITY-ST-ZIP			3 4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NÁME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		El civilge Li Addition
STREET ADDRESS			5.3 STREET ADDRESS		}
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETÉ	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
Indicated of officer or of	on this annual report or supplemental a director of the corporation or the receiver or Block 13 if changed, or on an attact	annual report is true and accura rer or trustee empowered to exe rment with an address.	ate and that my signate ocute this report as rec	n Section 119.07(3)(i), Florida Statutes. I further oure shall have the same legal effect as if made unquired by Chapter 607, Florida Statutes; and that	nder oath; that I am an
SIGNATURE: MANUE NOUNALE 4-20-98					