## 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

P97000065833 (0) DOCUMENT #

DETAILS UNLIMITED, INC.

**FILED** May 04 1998 8:00am Secretary of State



r incipal mac	e of Business	Mailing Address				
		Mailing Address				
3250 NW 38T Miami Fl. 331		3250 NW 38TH S MIAMI FL 33142	51			
THISTON I S. OUT	7.79	milimi i C 0014E				DO NOT WRITE IN THIS SPACE
						Date incorporated or Qualified     07/30/1997
	lace of Business	2a. Mailing Addre	SS			4. FEI Number Applied For
21		26				65-0773354 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, 6	etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State	е	City & State			· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing \$5.00 May Be
23		28]				Trust Fund Contribution Added to Fees
Zip	Country	Zφ	<b>├</b> ──¬	ountry		This corporation owes or has paid the current year Intangible
24	25	[29]	30			Personal Property Tax due June 30. Yes No
		of Current Registered Agent		81		10. Name and Address of New Registered Agent
	INKLEY, LINDSAY			"	Name	
	50 NW 38TH ST AMI FL 33142			82	Street Address (P.O. Box Number is Not Acceptable)	
				83		
	•			84	City	FL 85 Zip Code
44.5		007.07.00	- A			poration submits this statement for the purpose of changing its registered
office or re	m familiar with, and accept t	the obligations of Section 607.0	1505 - Florida St	29futet	•	
office or re agent. I as SIGNATURE	m familiar with, and accept to					ation's board of directors. I hereby accept the appointment as registered
office or reagent. I as	Signature, typod or printed nation of re-			ered Ager		
office or re agent. I as SIGNATURE	Signature, typod or printed nation of re-	gistred agent and title if applicable	(NOTE: Registe	ered Ager		ired when reinstaling) DATE
office or reagent. I as SIGNATURE	Signature typind or printed name of re	gist red agent and tille if applicable DERS AND DIRECTORS	(NOTE: Registe  13  ETE 1.1	ered Ager		ared when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
office or reagent. I as SIGNATURE	Signature typed or printed name of re OF LIC	gist red agent and tille if applicable DERS AND DIRECTORS	(NOTE Registe  13 ETE 1.1	ered Ager 3. I TITLE	nt signature requ	ared when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
office or reagent. I at SIGNATURE  12.  TITLE NAME	Signature hyperical privated nation of re- OFFIC PD CASTILLO, DANIEL	gist red agent and tille if applicable DERS AND DIRECTORS	(NOTE: Registe  13 ETE 1.1   1.2   1.3	ered Ager 3. I TITLE P NAME	nt signature requi	ared when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
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