

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 06, 1999 8:00 am
Secretary of State

05-06-1999 90236 046 ***150.00

DOCUMENT # P97000087739

1. Corporation Name

DANLYNN PROPERTIES, INC.

Principal Place of Business

18806 NW 13TH COURT
PEMBROKE PINES FL 33029

Mailing Address

18806 NW 13TH COURT
PEMBROKE PINES FL 33029

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/10/1997

4. FEI Number

65-0802965

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 the current year Intangible
Personal Property Tax.

Yes No

2. Principal Place of Business

21 12991 NW 1 ST

2a. Mailing Address

26 P.O. Box 245787

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 #210

27

23 City & State
Pembroke Pines FL

28 City & State
Pembroke Pines FL

24 Zip
33028

25 Country
USA

29 Zip
33024-0113

30 Country
USA

9. Name and Address of Current Registered Agent

MC GEE, RHONDA L.
18806 NW 13TH COURT
PEMBROKE PINES FL 33029

10. Name and Address of New Registered Agent

81 Name
Rhonda L. McGee

82 Street Address (P.O. Box Number is Not Acceptable)
12991 NW 1ST #210

83

84 City
Pembroke Pines FL

85 Zip Code
33028

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 Rhonda L. McGee Rhonda L. McGee-President 4-28-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME MC GEE, RHONDA L.
STREET ADDRESS 18806 NW 13TH CT
CITY-ST-ZIP PEMBROKE PINES FL 33029

DELETE

TITLE VP
NAME MC GEE, DANIEL P.
STREET ADDRESS 18806 NW 13TH COURT
CITY-ST-ZIP PEMBROKE PINES FL 33029

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

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 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 attachment with an address, with all other like empowered.

SIGNATURE: Rhonda L. McGee 4-28-99 954-431-5263
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (11/98)