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PROFIT CORPORATION ANNUAL REPORT

1999



FLORICA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90031 031 ***150.00

1. Corporation	MENT # P97000 DAN, INC.	0091262							
Principal Place	of Business	Mailing Address				III us ifi uu		ia fibla al	(50)(81 100)
3020 TOWN & C OVIEDO FL 3276	OUNTRY ROAD	OAD					_		
	•				DO NOT WRI	TE IN TH	IIS SPAC	t	
					Date Incorporated or Qualifed 10/22/1997				
2. Principal Pla	ace of Business	2a. Mailing Address			FEI Number]_		lied For
21		26		<u> </u>	<u>59-3475110</u>				Applicable
Suite, Apt. #	t, etc.	Suite, Apt. # etc.		5.	Certificate of Status Desired			ee Req	dditional uired
22		City & State		-	Election Campaign Financing			5.00 h	
City & State	;	28		1 -	Trust Fund Contribution			dded to	
23 Zip	Country	Zip	Country		This corporation owes the curr	 ∈nt year	Intangib	e	
24	25	29	30		Personal Property Tax.		X Y		□No
	9. Name and Address of Curre	ent Registered Agent		10.	Name and Address of New F	Register	ed Agent	<u> </u>	
	NAME (48) 1444 A 87		81 Name						
MALONE, WILLIAM C IV			82 Sitreet Adds	ress (P	O. Box Number is Not Accepta	able)			
827 MENENDEZ COURT ORLANDO FL 32801			83						
1 3270 4	NUU FL 32001		63						
Ç, IL							85	Zip C	-4-
Ç. IL			84 City			F	1 63	i Fib C	oae
11. Pursuant t	o the provisions of Sections 607.05 sgistered agent, or both, in the State in familiar with, and accept the oblig	e of Fiorida. Such chari le was a	es, the above-named corporation	porationion's bo	n submits this statement for the pard of directors. I hereby accep	purpose pi the ap	of chance	ring its r	registered
11. Pursuant toffice or reagent. I ar	egistered agent, or both, in the State in familiar with, and accept the oblig Signature, typed of printed name of regis ared ag	gations of, Section 607./)505, Flo gent and title if applicable. (NOTE	es, the above-named corporation	ed when	and of uncctors. Thereby does	purpose p: the ap	of change pointmen	ling its reg	registered jistered
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officer or director of the corporation or the receiver of trustee employered to execute this report as re-Block 12 or Block 13 if changed, or an attachment with an address, with all other like empowered.

SIGNATURE: _ SIGNATURE AND 1 PPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 11 JORGAN TV 4/12/99