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

--PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

1999

Jun 01, 1999 8:00 am Secretary of State 06-01-1999 90013 011 ***150.00

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DOCUMENT # 998000064466					00 01 1555 30013 01	1 150	.00	
\mathcal{D}	T Warehoush.	Inc						
Principal Pla	ce of Business	Mailing Address			-			
	· · · · · · · · · · · · · · · · · · ·	2788 W 7	U ST					
			-/	2110	DO NOT WRITE IN THIS SPACE			
Hiami, FL 33016 Hialeah, FL 3301				110	3. Date Incorporated or Qualifed			
					7/22/98			1
2. Principal Place of Business 2a. Mailing Address					4. FEI Number 66 - 085/864	<u> </u>	plied For	4
Suite, Apt	t # etc	Suite, Apt. #, etc.			05-005/009	\$8.75	t Applicable	1
22	, 5.0.	27			5. Certificate of Status Desired	Fee Re		-
City & State City & State					6. Election Campaign Financing	\$5.00	May Be	1
23		28			Trust Fund Contribution	Added 1	•	
Zip	Country	Zíp	Country		8. This corporation owes the current year Inta	<u>-</u> -	-	
24	25		30			Yes	□No	-
	9. Name and Address of Curre	nt Registered Agent	81	Name	10. Name and Address of New Registered A	gent		1
	\circ τ		[81]	ivanie			1	
Mose Danlon				Street Add	ess (P.O. Box Number is Not Acceptable)			}
2788 W 745T								1
Fose Danton 2788 W 745T Hialeah, FL 330Hb						· · · · · · · · · · · · · · · · · · ·		
Hiallan, FL 33000				City	FL	85 Zip C	Code	
					oration submits this statement for the purpose of c			1
	registered agent, or both, in the State am familiar with, and accept the obligation			he corporation	on's board of directors. I hereby accept the appoint	ment as req	gistered	
SIGNATURE								
	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE:	Registered Agent	signature require	d when reinstating) DATE			5
12.	OFFICERS AND DIRECTORS DIDLETE		13.		ADDITIONS/CHANGES TO OFFICERS AND		RS IN 12	5
TITLE	WP13/T-		1.1 TITLE			Change	☐ Addition	5
NAME STREET ADDRESS	Jese Dunlon		1.2 NAME	ADDOESOS	•			è
CITY-ST-ZIP	2788 W 7457 History, EL 33016		1.3 STREET ADDRESS 1.4 City-St-ZIP					2
TITLE	DELETE		2.1 TITLE			Change	Addition	5
NAME			2.2 NAME				_	
STREET ADDRESS	Si .		2.3 STREET	ADDRESS				
CITY-ST-ZIP			2. 4 CITY-ST	-ZIP				
TITLE	☐ DELETE		3.1 TITLE		•	Change	Addition	
NAME	}		3.2 NAME				1	
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP			34 CITY-ST	-ZIP				1
TITLE	DELETE		4.1 TITLE			Change	☐ Addition	
NAME		4. 2 NAME				i	1	
STREET ADDRESS			4.3 STREET					1
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY-ST- 5.1 TITLE	ZIP		Change	Addition	İ
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CITY-ST-ZIP			5.4 CITY-ST-	i			{	,
TITLE		☐ DELETE	6.1 TITLE			Change	Addition	i
NIATE -			6.2 NAME					
orHittell ADDRESS			63 STREET A	DDRESS				i

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 of 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, of on an attachment with an address, with all other like empowered.