


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

FILED
May 13, 1999 8:00 am
Secretary of State

05-13-1999 90016 048 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000065396
Corporation Name DIB, Inc.

Principal Place of Business 11811 N.E. 6th Avenue Biscayne Park, Florida 33131
Mailing Address SAME

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 7/23/98	4. FEI Number 650865901	Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent
ISABEL BOHBOT
11811 NE 6 AVENUE
BISCAYNE PARK, FLORIDA 33161

10. Name and Address of New Registered Agent
81 Name HKE&F Registered Agent Corp.
82 Street Address (P.O. Box Number is Not Acceptable)
2801 S. Bayshore Drive, Suite 600
83
84 City Miami FL 85 Zip Code 33131

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.
HKE&F Registered Agent Corp. *Isabel Bohbot Sec* 4/19/99

SIGNATURE _____ DATE 4/19/99
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

2. OFFICERS AND DIRECTORS		13.
TITLE DIR	Isabel Bohbot 11811 NE 6 Ave. Biscayne Park, Fl 33161	<input type="checkbox"/> DELETE
TITLE		<input type="checkbox"/> DELETE
TITLE		<input type="checkbox"/> DELETE
TITLE		<input type="checkbox"/> DELETE
TITLE		<input type="checkbox"/> DELETE
TITLE		<input type="checkbox"/> DELETE
TITLE		<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE Pres/Dir Isabel Bohbot	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME 11811 NE 6 Ave	
13 STREET ADDRESS Biscayne Park, Florida 33161	
14 CITY-ST-ZIP	
21 TITLE VP/Dir Charles Daniel Bohbot	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME 11811 NE 6 Avenue	
23 STREET ADDRESS Biscayne Park, Florida 33161	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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)(b) 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: *Isabel Bohbot*
ISABEL BOHBOT
(305)895-2822 Daytime Phone #

CR2E034 (11/08)