## 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

## DOCUMENT # P98000107572

Principal Place of Business	Mailing Address	

## FILED Mar 06, 1999 8:00 am **Secretary of State**

03-06-1999 90008 002 \*\*\*150.00

D & D INVESTMENTS GROUP, INC. 800 BRICKELL AVE. SUITE 902 800 BRICKELL AVE. SUITE 902 MIAMI FL 33131 MIAMI FL 33131 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 12/28/1998 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business. Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 23 Country 8. This corporation owes the current year Intangible Zip Country Zip MNo Personal Property Tax. 24 30 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 WALDMAN, GLEN H 82 Street Address (P.O. Box Number is Not Acceptable) 800 BRICKELL AVE, SUITE 902 **MIAMI FL 33131** 83 85 Zio Code 84 City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. □ DELETE 1.1 TITLE TITLE GUY, DENNIS GUY, DAVID 1.2 NAME NAME 800 BRICKELL AVE, SUITE 902 800 BRICKELL AVE, SUITE 902 1.3 STREET ADDRESS STREET ADDRESS MIAMI, FL 33131 MIAMI FL 33131 CITY-ST-ZIP 1.4 CITY-ST-ZIF DELETE ☐ Addition 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition □ DELETE ☐ Change 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

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 address, with all other like empowered

SIGNATURE:

URED

Davtime Phone #

CR2E034 (11/98)