

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P99000011366

Entity Name: DHL ENTERPRISES, INC.

FILED
Sep 06, 2006
Secretary of State

Current Principal Place of Business:

45 A INDUSTRIAL BLVD
PENSACOLA, FL 32503

New Principal Place of Business:

Current Mailing Address:

45 A INDUSTRIAL BLVD
PENSACOLA, FL 32503

New Mailing Address:

FEI Number: 59-3562895

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LABBIE, JAMES K
45 A INDUSTRIAL BLVD
PENSACOLA, FL 32503 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LABBIE, JAMES K
Address: 45 A INDUSTRIAL BLVD
City-St-Zip: PENSACOLA, FL 32503

Title: DBA () Delete
Name: DBA FLORIDA INSURANC, E AGENCY
Address: 45A INDUSTRIAL BLVD.
City-St-Zip: PENSACOLA, FL 32503

Title: MAN () Delete
Name: EL KHOURY, WADIIH
Address: 45A INDUSTRIAL BLVD.
City-St-Zip: PENSACOLA, FL 32503

Title: SEC () Delete
Name: LABBIE, DUSTI A
Address: 45A INDUSTRIAL BLVD.
City-St-Zip: PENSACOLA, FL 32503

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LABBIE, JAMES K
Address: 45 A INDUSTRIAL BLVD
City-St-Zip: PENSACOLA, FL 32503

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: EL KHOURY, WADIIH
Address: 45A INDUSTRIAL BLVD.
City-St-Zip: PENSACOLA, FL 32503

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES K LABBIE

P

09/06/2006

Electronic Signature of Signing Officer or Director

Date