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Apr 09 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S43408

(1)

1. Corporation Name

DJL FINANCIAL SERVICES, INC.

Principal Place of Business

41 NW 132ND PLACE
MIAMI FL 33182

Mailing Address

41 NW 132ND PLACE
MIAMI FL 33182-1837



2. Principal Place of Business

21 2280 S.W. 143 Place

2a. Mailing Address

26 2280 S.W. 143 Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Miami, Florida

City & State

28 Miami, Florida

Zip

24 33175

Country

25 DADE

Zip

29 33175

Country

30 DADE

9. Name and Address of Current Registered Agent

FERRARESI, DANIEL J.
3300 PGA BLVD
STE 810
PALM BEACH GARDENS FL 33410

3. Date Incorporated or Qualified

04/05/1991

3a. Date of Last Report

04/05/1996

4. FEI Number

65-0258760

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	DP
NAME	FERRARESI, DANIEL J.	1.2 NAME	Ferraresi, Daniel J.
STREET ADDRESS	41 NW 132ND PLACE	1.3 STREET ADDRESS	2280 S.W. 143 Place
CITY - ST - ZIP	MIAMI FL	1.4 CITY - ST - ZIP	Miami, FL
TITLE	DVP	2.1 TITLE	DVP
NAME	CABRERA, J. LUIS	2.2 NAME	Cabrera, J. Luis
STREET ADDRESS	41 NW 132ND PLACE	2.3 STREET ADDRESS	2280 S.W. 143 Place
CITY - ST - ZIP	MIAMI FL	2.4 CITY - ST - ZIP	Miami, FL
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)