

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **S43717** (5)

1. Corporation Name

DILLINGHAM HOLDINGS, INC.



Principal Place of Business

**701 BRICKELL AVE.
SUITE 1600
MIAMI FL 33131**

Mailing Address

**801 BRICKELL AVENUE
SUITE 1301
MIAMI FL 33131
US**

3. Date Incorporated or Qualified

04/08/1991

3a. Date of Last Report

04/27/1995

2. Principal Place of Business

2a. Mailing Address

21 **701 Brickell Avenue**

22 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 **Suite 850**
28 **Miami, Florida**

24 Zip Country

29 **33131** 30 **USA**

4. FET Number

65-0256968

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

9. Name and Address of Current Registered Agent

**SULLIVAN, JOHN S
801 BRICKELL AVENUE
SUITE 1301
MIAMI FL 33131**

81 Name

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

701 Brickell Avenue

83 Suite 850

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.

SIGNATURE

Signature of Registered Agent (Print Name and Title)

DATE: Registered Agent Signature (Print Name and Title)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **DP**
STREET ADDRESS **SULLIVAN, JOHN S**
CITY-ST-ZIP **801 BRICKELL AVENUE, SUITE 1301**
MIAMI FL 33131

TITLE ☐ DELETE

NAME **S**
STREET ADDRESS **SULLIVAN, JOHN S**
CITY-ST-ZIP **801 BRICKELL AVENUE, SUITE 1301**
MIAMI FL 33131

TITLE ☐ DELETE

NAME **VP**
STREET ADDRESS **SULLIVAN, JOHN S**
CITY-ST-ZIP **801 BRICKELL AVE., STE. 1301**
MIAMI FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: **John S. Sullivan / Director**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/26/96

(305)381-8340

CR2E034 (12/95)