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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

S72539

1. Corporatio	MENT # <b>\$72!</b> ILM DENNIS INC.	539 (7)					
	E W. DEMILO IIIO						
Principal Place of Business Mailing Address							BIRK BURN BURN HEBE
1024 10TH LN PALM BEACH GARDENS FL 33418		1024 10TH LN Palm Beach Garden:	S FL 33418				
					3. Date Incorporated or Qualified	3a. Date of La	st Report
2. Principal P	lace of Business	2a. Mailing Address			08/07/1991	08/10/	1995
21	26 26		22		4. FEI Number		Applied For
Suite, Apt. #, etc.			Suite, Apt. #, etc.		00.75		Not Applicable
22		27	27		<ol><li>Certificate of Status Desired</li></ol>		.75 Additional ee Required
City & State		City & State	F=		6. Election Campaign Financing		
<b>[23]</b> Zip		28	T		Trust Fund Contribution		.00 May Be
24	Country   Zip   Zip		Country	,	8. This corporation has liability for intangible tax under s 199 032		
9. Name and Address of Current Registered Agent					Florida Statutes Yes No  10. Name and Address of New Registered Agent		
			81	Name	TO. Wante and Adoress of New M	egistered Agent	
DENNIS, DANIEL M.			82	Stroot Ade	dress (P.O. Box Number is Not Acceptable		
1024 10			02	Sireer Aut	dress (P.O. Box Number is Not Acceptable	<del>0</del> )	
PALM B	EACH GARDENS FL 33418		83				
			84	City		lar I	Zie Code
11. Pursuant t	to the provisions of Sections 607	0000 and 002 4500 Ct		,		FL 85	Zip Code
or register	ed agent, or both, in the State of	5002 and 607.1508, Florida Statutes Florida. Such change was authorized Section 607.0505, Florida Statutes.	s, the above-r d by the corp	named corpo pration's boa	pration submits this statement for the purp and of directors. I hereby accept the appo	oose of changing i	ts registered office
SIGNATURE	an, and accept the obligations of,	Section 607.0505, Florida Statutes.				The Red Togisto	160 agent. Fain
SIGNATURE _	Signature, typico or printed name of registered	agent and title if applicable (NOTE	Bagistered Agen	t signature ren in	ed wher reinstating)		v
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIREC	TORS IN 12
TITLE	DEMINIO DANDEL AL	DANDE				☐ Chang	
NAME STREET ADDRESS	DENNIS, DANIEL M. 1024 10TH LN		1.2 NAME 1.3 STREET ADDRESS				
STREET ADDRESS	PALM BCH GARDENS FL						
CITY-ST-ZIP TITLE	TALM DOTI GARDENS PL	T DELETE	1.4 CHY-S!	- ZIP			
NAME		L] better	21177722			Chang	le 🔲 Addition
STREET ADDRESS			2.2 NAME	4DDDCCC			
CITY - ST - ZIP			2.3 STREET ADDRESS				
TITLE	DELETE		3. 1 TITLE			Chang	e Addition
NAME	3.		3.2 NAME	1		<u> </u>	- D VOORION
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			34 CITY - ST	- ZIP			
TITLE NAME	DELETE		4 1 TITLE			☐ Chang	e 🔲 Addition
STREET ADDRESS			4.2 NAME				
CITY-ST-ZIP			4.3 STREET A	í			
TITLE	FD 564 576		4.4 CITY - ST- 5 1 TITLE	- ZIP			F== 4
NAME			5.2 NAME			☐ Change	e 🔲 Addition
STREET ADDRESS			5.3 STREET A	DDRESS			1
CITY-ST-ZIP			5.4 City - St-	1			
TITLE	DELETI		6 1 TITLE			☐ Change	Addition
NAME			62 NAME			onlying	
STREET ADDRESS			6.3 STREET A	DDRESS			
CffY-ST-ZIP	certify that the information as a selection	nd with H in floor in -1	6.4 CiTy - ST-	ZIP			1
certify that t	the information indicated on this a	power or is ming is voluntarily turnish	ed and does	not qualify fo	or the exemption stated in Section 119.07	(3)(k), Florida Stat	utes 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 appears in Block 12 or Block 13 if changed, at on an attachment with an address. SIGNATURE: 2 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DENVIS 4/30/96 467-630-8237