SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # S85748 (9)

1. Corporation Name
DLOR INTERNATIONAL, INC.

Principal Place of Business
1225 N MILITARY TRAIL #3
WEST PALM BEACH, FL 33409

Mailing Address
1225 N. MILITARY TRAIL #3
WEST PALM BEACH, FL 33409

3. Date Incorporated or Qualified: 10/07/1991
3a. Date of Last Report: 5/11/1995

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27
City & State — 23
City & State — 28
Zip — 24
Country — 25
Zip — 29
Country — 30

4. FEI Number: 65-0290265 — 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

9. Name and Address of Current Registered Agent
COLBATH, JEFFREY J
1655 PALM BEACH LAKES BLVD.
THE FORUM SUITE 1010
WEST PALM BEACH, FL. 33409

10. Name and Address of New Registered Agent
81 Name: FERGUSON DARL
82 Street Address (P.O. Box Number is Not Acceptable): 2000 NORTH CONGRESS AVE #208
83
84 City: WEST PALM BEACH FL — 85 Zip Code: 33409

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: DARL FERGUSON — Darl Ferguson — 7/15/96
Signature (typed or printed name of registered agent and date if applicable) (NOTE: Registered agent's signature required when applicable) DATE

12. OFFICERS AND DIRECTORS

TITLE	PST ☒ DELETE
NAME	MANZANO, FRANK
STREET ADDRESS	1225 N. MILITARY TRAIL #3
CITY-ST-ZIP	WEST PALM BEACH, FL 33409
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	PSTD ☒ Change ☐ Addition
12 NAME	MANZANO, BLANCA DORYS
13 STREET ADDRESS	1225 N. MILITARY TRAIL #3
14 CITY-ST-ZIP	WEST PALM BEACH, FL. 33409
21 TITLE	[redacted] ☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

000001900690
-07/22/96--01063--009
***225.00

1-22-96

CR2E034 (3/96)

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Dorys Manzano — 7/15/96 — (407) 640-3625
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE

BLANCA DORYS MANZANO / PRESIDENT