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

V36100

(8)

DOCUMENT # DANMAR, INC.

Principal Place of Business									
999 EAST CAMINO REAL									

Mailing Address



999 EAST CAMINO REAL BOCA RATON FL 33432 US				P. O. BOX 28 TAYLOR PA 18517 US				3. Date Incorporated or	Qualified	3a. Date	of Las	t Benort	
								05/14/1992	Qualific C			1995	
2. Principal f	Place of Busine	ss	2a.	Mailing Address				4. FEI Number		<u> </u>	Τ,	Applied For	
21			26					65-0334798				Not Applicable	
Suite, Apt. #, etc. 27				Suite, Apt. #, etc.				5. Certificate of Status [Certificate of Status Desired S8.75 Additional Fee Required				
City & State				City & State				6. Election Campaign Fi	_	\$5.00 May Be			
23				Zip Country			Added to Fees						
Zip	-	Country 25	29	Zip	30	ntry		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes					
24		tered Agent	1301			10. Name and Address of New Registered Agent							
						81	Name						
LICCE	, DOMENICI	K IR						Idaa (D.O. Day N. sahar is Na	Assestati	In)			
	PALM BEAC			82	Street Ad	ddress (P.O. Box Number is No	Acceptab	ie)					
	1200					83							
WEST PALM BEACH FL 33402										·····	1001	Zin Code	
						84	City			FL	85	Zip Code	
11. Pursuant or registe familiar A SIGNATURE	vith, and accer	ons of Sections 607.050; both, in the State of Flori of the obligations of Sec	2 and 60 da. Such tion 607.	.0505, Florida Statutes.	ed by the o	ve-r	named corp oration's b	poration submits this statement oard of directors. I hereby acce	for the pur pt the appo	pose of cha pintment as	nging i egiste	its registered office ered agent. I am	
		or printed han e of registered agen	and trie if	appicable. (NO		Ager	nt signature reg	ulred when reinstating)		DATE			
12.	/ BV	OFFICERS AN	D DIREC		13.		···	ADDITIONS/CHANGE	S TO OFF				
HILE	DV	LA CADMENTA		DELETE	1.1 T			•		L) Chan	ge	
NAME	800 51	LA, CARMEN A.			1.2 N								
STREET ADDRESS		ST CAMINO REAL					ADDRESS						
CITY-ST-ZIP	DST	RATON FL		□ DELETE			ST - ZIP			<u>_</u>) Chan	ge Addition	
TITLE		LA, JAMES D.		☐ DELETE	2 1 1					L_) Cilati	de 🗀 voquion	
NAME	1	IST CAMINO REAL			22 N								
STREET ADDRESS	1	RATON FL					ADDRESS						
CITY-ST-ZIP TITLE	DP	MATONITE		□ DELETE	3 1 1		ST-ZIP			F] Chan	ge Addition	
NAME	1 -	NI, RENATO P.			32 N							•	
STREET ADDRESS	L .	ST CAMINO REAL					T ADDRESS					:	
CITY-ST-ZIP		RATON FL					ST - ZIP						
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NAME					4.2 N	AME.				_			
STREET ADDRESS					4.3 S	REET	T ADDRESS						
C-TY-ST-Z-P					4.4 C	1Y-5	ST-ZIP						
TITLE				□ DELETE	5 1 7	TLE] Chan	ige 🔲 Addition	
NAME					52 N	ME							
STREET ADDRESS	:				538	REET	ADDRESS						
CITY-ST-ZIP					5.4 C	TY - 9	ST-ZIP						
TITLE				☐ DEFELE	6 1 T	TLE] Chan	ige 🔲 Addition	
NAME					6.2 N	AME	ļ						
STREET ADDRESS					6.3 S	reei	T ADDRESS						
CITY - ST - ZIP							ST-ZIP						
14. I do here	eby certify that	the information supplied	with this	filing is voluntarily furni	ished and	doe	es not quali	fy for the exemption stated in S	ection 119.	.07(3)(k), Flor	ida St	atutes. 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 of 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