FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary &f State DIVISION OF CORPORATIONS

DOCUMENT # V36100 1. Corporation Name

0/

(8)

DANMAR, INC.

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

999 EAST CAMINO REAL BOCA RATON, FL 33432 US

PO BOX 28 TAYLOR, PA 18517-0028

FILED Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90119 030 ***150.00

	DO NOT WRITE IN THIS SPACE
3.	Date Incorporated or Qualifed

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

05/14/1992

65-0334798

5. Certifcate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

4. FEI Number

Zip	Country	Zip		Country			8. This corporation owes the co	urrent year In	tangible	
24	25	29	30)			Personal Property Tax.		Yes	□No
	9. Name and Address of Current R	legistered Aç	jent				0. Name and Address of Nev	v Registered	Agent	
				81	Name					
LIOCE, DOMENICK R. 1645 PALM BEACH LAKES BLVD.					Street A	Address	(P.O. Box Number is Not Accept	ptable)		
		DLVD.		83						
	E 1200	22 h A 2		"						}
WEST PALM BEACH, FL 33402					City			FL	-	Code
office or re	to the provisions of Sections 607.0502 a egistered agent, or both, in the State of F m familiar with, and accept the obligation	Florida, Such	change was auth	orized by	the corpo	corporat oration's	ion submits this statement for the board of directors. I hereby acc	ne purpose of cept the appo	changing its intment as re	registered gistered
SIGNATURE										
	Signature, typed or printed name of registered agent an		(NOTE: Re		t signature re	required who	en reinstating)	DATE	UD DIDECTO	2DC IN 12
12.	OFFICERS AND I	DIRECTORS	 □ DELETE	13.	1	1	ADDITIONS/CHANGES TO C	JFFIÇEKS AI	Change	Addition
TITLE	DV	_	C) DELEVE						onango	
NAME	DANELLA, CARMEN			1.2 NAME						ĺ
STREET ADDRESS	999 EAST CAMINO F			1.3 STREET						}
CITY-ST-ZIP	BOCA RATON, FL 3	3432	C) DELETE	1.4 CITY-ST	Γ-Z/P		·		Channe	Addition
TITLE	DST		☐ DELETE	2.1 TITLE					☐ Change	Addition
NAME	DANELLA, JAMES D	•		2.2 NAME						
STREET ADDRESS	999 EAST CAMINO F			2.3 STREET	ADDRESS					{
CITY-ST-ZIP	BOCA RATON, FL			2. 4 CITY - S	T-ZIP		<u></u>			
TITLE	DP		☐ DELETE	3.1 TITLE					Change	Addition
NAME	MARIANI, RENATO	Ρ.		3.2 NAME						
STREET ADDRESS	999 EAST CAMINO F			3.3 STREET	ADDRESS					
CITY-ST-ZIP	BOCA RATON, FL	33432_		3.4. CITY-S	T-ZIP					
TITLE	· · · · · · · · · · · · · · · · · · ·		☐ DELETE	4,1 TITLE	İ	ĺ			☐ Change	Addition
NAME				4. 2 NAME						
STREET ADDRESS				4 3 STREET	ADDRESS					
CITY-ST-ZIP				4.4 CITY-ST	-ZIP					
TITLE			□ DELETE	51 TITLE					Change	☐ Addition
NAME				5.2 NAME						ļ
STREET ADDRESS				5.3 STREET	ADDRESS					
CITY-ST-ZIP			i	5.4 CITY-S1	-ZIP					
TITLE			☐ DELETE	6.1 TITLE		<u> </u>			☐ Change	Addition
NAME				6.2 NAME						
STREET ADDRESS				6.3 STREET	ADDRESS					
CITY-ST-ZIP				6.4 CITY- ST	ZIP					
	ertify that the information supplied with the	his filing does	not qualify for the	e exempti	on stated	in Sect	on 119.07(3)(i), Florida Statutes			

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 ar 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, with all other like empowered.

Daytime Phone #