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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V44349

(1)

DANAN ENTERPRISES, INC.

| FILED |
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| Jan 14 1997 8:00am |
| Secretary of State |
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| 8491 NW 177H STE 113 MIAMI FL 3312 US 2. Principal P 21 Suite, Apt 22 City & Stat 23 | ### STE. 113 MI FL 33126 MIAMI FL 33126-1025 | | 8491 NW 17TH STREET STE. 113 MIAMI FL 33126-1025 2a. Mailing Address 26 Suite, Apt #, etc. 27 City & State | | 3. Date Incorporated or Qualified 06/15/1992 4. FEI Number 65-0333138 Solution Status Desired 6. Election Campaign Financing Trust Fund Contribution 3a. Date of Last Report 03/29/1996 Applied Not App \$8.75 Addition Fee Required \$5.00 May 8 Added to Fee | | |
|---|---|---|---|-------------|--|------------------|-----------------|
| Z(p) | | | Country | | 8. This corporation has liability for it | | er s. 199.032, |
| 24 | 25 9. Name and Address of Current | 29 Registered Agent | [30] | | Florida Statutes 10. Name and Address of New Reg | Yes No | |
| 7441 MIAI | RIGUEZ, MARIA MARIN I SW 74 AVE. MI FL 33143 | | 81 82 83 | City | dress (P.O. Box Number is Not Acceptab | FL 85 | Zip Code |
| agent La | to the provisions of Sections 607.0502 egistered agent, or boln, in the State or tensiliar with, and accept the obligation to the section of | of Florida, Such change war inns of, Section 607,0505 and the daylesable (N | s authorized by Florida Statutes IOTE Registered Age | the corpora | rporation submits this statement for the pration's board of directors. I hereby acception where renstating) | t the appointmen | t as registered |
| TIDLE | D OFFICENS AND | DELETE | 13. | Т | ADDITIONS/CHANGES TO OFFIC | EHS AND DIREC | |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | RODRIGUEZ, MARIA MARIN 7441 SW 74 AVE. MIAMI FL | ☐ DELETE | 1.2 NAME 1.3 STREET 1.4 CHY - S 2.1 TITLE | | | ☐ Chan | |
| STREET ADDRESS City+St+ZiP DILE | | DELETE | 2.2 NAME 2.3 STREET 2.4 CITY: 5 3.1 TITLE | | | ☐ Chan | ge Addilion |
| NAME STREET ADDRESS CITY+S1+ZP | | Secre | 3.2 NAME 3.3 STREET 3.4. CITY-S | 1 | | | |
| TTLE NAME STHEET ADDRESS CITY-ST-74P | | DELETE | 4 1 TITLE 4 2 NAME 4 3 STREET 4 4 CITY-S | · | | Chan | ge 🔲 Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIF | | ☐ DELETE | 5 1 MLE 5 2 NAME 5 3 STREET | ADDRESS | | Chan | ge 🔲 Addition |
| 1 TLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ DELEFE | 5.4 CHY-S 6.1 TITLE 6.2 NAME 6.3 STREET 6.4 CHY-S | ADDRESS | | Chan | ge Addition |

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this across 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 circular of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if charged, or on an attachment with an address.

Maria M. Rodriguez

SIGNATURE: // June //- / Ode

IN OFFICER OR DIRECTOR

1-7-97

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