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

Mailing Address

C/O CEC CORPORATION

FT. LAUDERDALE FL 33308

4817 N.E. 23 AVENUE

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # V62199 1. Corporation Name

Principal Place of Business

PORT EVERGLADES FL 33316

P.O. BOX 13114

DAY MARK INTERNATIONAL, INC.

| | es of Ducinons | 2a. Mailing Address | s | | | 4. FEI Number | | lied For |
|---|--|---|---|--|--|---|----------------------|------------|
| | ace of Business | 26 | _ | | | 65-0357048 | Not | Applicable |
| 21 Suite, Apt. # | ⊭, etc. | Suite, Apt. #, et | tc. | | - | 5. Certificate of Status Desired | \$8.75 Ac Fee Req | |
| 22 | | City & State | | | | 6. Election Campaign Financing | \$5.00 N | /lav Be |
| City & State |) | 28 | | | | Trust Fund Contribution | Added to | |
| Zip | Country | Zip | Co | ountry | | 8. This corporation owes the current year Ir | ntangible | ٦ |
| 24 | 25 | 29 | 30 | | | Personal Property Tax. | | □No |
| | 9. Name and Address of Curren | t Registered Agent | | | | 10. Name and Address of New Registered | Agent | |
| | | | | 81 | Name | · | | |
| Grandy, Daniel 1220 N.E. 11TH Avenue Ft. Lauderdale Fl 33304 | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | |
| | | | | | | | | |
| | | | | 83 | | | | |
| | | | | 84 City FL 85 Zip Code | | | | _ |
| | | 2 + 007 4500 Clasida | Ctatutes the | ahove | named corn | oration submits this statement for the purpose on's board of directors. I hereby accept the app | of changing its | egistered |
| 11. Pursuant t | to the provisions of Sections 607.050 egistered agent, or both, in the State | of Florida. Such change | was authoriz | ed by t | he corporatio | n's board of directors. I hereby accept the app | ointment as reg | jistered |
| agent. I ar | egistered agent, or both, in the State m familiar with, and accept the obliga | tions of, Section 607.05 | 505, Florida St | tatutes. | | | | |
| SIGNATURE | | | (NOTE: Posiete | and Angot | cionature required | s when reinstating) DATE | | |
| | Signature, typed or printed name of registered ager | nt and title if applicable. ID DIRECTORS | | 3. | algricular roder oc | ADDITIONS/CHANGES TO OFFICERS | ND DIRECTO | RS IN 12 |
| 12. | | DEL DEL | | 1 TITLE | | | Change | ☐ Additio |
| TITLE | DPT DANKE | | | 2 NAME | | | | |
| NAME | GRANDY, DANIEL | | | | ADDRESS | | | |
| STREET ADDRESS | 1220 N.E. 11TH AVENUE | | | | | | | |
| CITY-ST-ZIP | FT. LAUDERDALE FL 33304 | □ DEL | | 4 CITY-ST 1 TITLE | -219 | | Change | Additio |
| TITLE | DVPS | | | 2 NAME | | | • | |
| NAME | ROENBECK, LESLIE | | | | ADDDESS | | | |
| STREET ADDRESS | | | | | ADDRESS | | | |
| | I ET IAIINEDNAIE EI 22204 | | ■ 2. | 4 CITY-S | T-ZIP | | | ☐ Additio |
| CITY-ST-ZIP | FT. LAUDERDALE FL 33304 | [7] DEI | LETE 2 | 4 TITLE | | | ☐ Change | |
| TITLE | FI. DAUDENDALE FE 33304 | ☐ DEI | | 1 TITLE | | | ☐ Change | |
| | FI. LAUDENDALE FL 33304 | □ DEI | . 3: | 2 NAME | | | ☐ Change | |
| TITLE | | □ DE | . 3.: 3. | 2 NAME 3 STREET | ADDRESS | | ☐ Change | |
| TITLE NAME | | | . 3: 3. 3. | 2 NAME 3 STREET 4. CITY-S | | | ☐ Change | . Additi |
| TITLE NAME STREET ADDRESS | | □ DEI | 3. 3. 3. LETE 4. | 2 NAME 3 STREET 4. CITY-S 1 TITLE | | | | . Additi |
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FILED Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90116 044 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

3. Date Incorporated or Qualifed

09/08/1992

4. FEI Number