FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED AND FILED

95 MAY -1 PM 1:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V64892** **(5)**

1. Corporation Name
DDM HOLDINGS, INC.

Principal Place of Business
77 HENDRICKS ISLE
FORT LAUDERDALE FL 33301

Mailing Address
77 HENDRICKS ISLE
FORT LAUDERDALE FL 33301

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/17/1992
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21
Suite Apt # etc
22
City & State
23
24 25

2a. Mailing Address
26
Suite Apt # etc
27
City & State
28
29 30

4. FEI Number: APPLIED FOR 65 0725835 — 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. Does corporation qualify for exemption under 501(c) of Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
PUL, DENNIS
77 HENDRICKS ISLE
FORT LAUDERDALE FL 33301

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0505 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 I accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	TITLE	☐ Change ☐ Addition
NAME	PUL, DENNIS	NAME	
STREET ADDRESS	77 HENDRICKS ISLE	STREET ADDRESS	
CITY, ST, ZIP	FORT LAUDERDALE FL	CITY, ST, ZIP	
TITLE	D	TITLE	☐ Change ☐ Addition
NAME	PUL, MICHAEL	NAME	
STREET ADDRESS	301 MAIN ST. EAST, PALMERSTON	STREET ADDRESS	
CITY, ST, ZIP	ONTARIO, CANADA	CITY, ST, ZIP	
TITLE	D	TITLE	☐ Change ☐ Addition
NAME	PUL, DINY	NAME	
STREET ADDRESS	301 MAIN ST EAST, PALMERSTON	STREET ADDRESS	
CITY, ST, ZIP	ONTARIO, CANADA	CITY, ST, ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY, ST, ZIP		CITY, ST, ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY, ST, ZIP		CITY, ST, ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY, ST, ZIP		CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing, and clearly identified as being not required for the exemption stated in Section 119.07(3)(n), Florida Statutes, 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 above, or on an attached sheet with its address.

SIGNATURE: DENNIS PUL 4/27/95 305-525-8444
SIGNATURE AND TYPED OR PRINTED NAME OF INCORPORATOR OR OFFICER OR DIRECTOR — Date — Daytime Phone

0210600 CP