

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandria B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 JUN 30 PM 2:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **G70450**  
1. Corporation Name  
**DRG ASSOCIATED ENTERPRISES, INC.**

Principal Place of Business Mailing Address  
**7408 SW 14 PL.  
NO. LAUDERDALE, FL. 33068**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified <b>11-83</b>		3a. Date of Last Report <b>5-94</b>	
2. Principal Place of Business 21 <b>1861 NO. POWERLINE RD.</b>		4. FEI Number <b>59-2356010</b>	
2a. Mailing Address 26 <b>PO BOX 1801 POMPANO BEACH</b>		Applied For Not Applicable	
22 <b>FLORIDA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
23 <b>33069</b>		27 <b>FLORIDA</b>	
24 <b>FLORIDA</b>		28 <b>FLORIDA</b>	
25 <b>FLORIDA</b>		29 <b>FLORIDA</b>	
30 <b>FLORIDA</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
		81 Name <b>DANIEL R. GIORDANO</b>	
		82 Street Address (P.O. Box Numbers Not Acceptable) <b>1861 N POWERLINE RD.</b>	
		83	
		84 City <b>POMPANO BEACH</b> FL 85 <b>33069</b>	

11. Pursuant to the provisions of Sections 607.0502 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 accept the obligations of, Section 607.0505, Florida Statutes.  
SIGNATURE **DANIEL R. GIORDANO / PRESIDENT** DATE **6/5/95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PRESIDENT</b>	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DANIEL R. GIORDANO</b>	12 NAME	
STREET ADDRESS	<b>1861 N POWERLINE RD.</b>	13 STREET ADDRESS	
CITY - ST - ZIP	<b>POMPANO BEACH 33069</b>	14 CITY - ST - ZIP	
TITLE		21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	<b>800001531048</b>
CITY - ST - ZIP		24 CITY - ST - ZIP	<b>-07/06/95--01064--016</b>
TITLE		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	<b>*****225.00 *****225.00</b>
CITY - ST - ZIP		34 CITY - ST - ZIP	
TITLE		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY - ST - ZIP		44 CITY - ST - ZIP	
TITLE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. 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 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.  
SIGNATURE: **DANIEL R. GIORDANO** DATE **6/5/95** (407) 482-6255  
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR