

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # G70450
 1. Corporation Name
DRG Associated Enterprises, Incorporated

Principal Place of Business Mailing Address
**8397 Bonita Isle Dr. PO Box 936391
 Lake Worth, Florida 33467 Margate, FL. 33093**

2. Principal Place of Business 21 8397 Bonita Isle Dr. Suite, Apt #, etc	2a. Mailing Address 26 PO Box 936391 Suite, Apt #, etc	3. Date Incorporated or Qualified Nov. 17, 1983	3a. Date of Last Report July 1995
22 City & State Lake Worth, FL	27 City & State Margate, FL.	4. FEI Number 59-2356010	Applied For Not Applicable
23 Zip 33467	25 Country USA	29 Zip 33093	30 Country USA

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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
**Daniel R. Giordano
 1861 N. Powerline Rd.
 Pompano Bch. FL. 33069**

10. Name and Address of New Registered Agent
 81 Name **Daniel R. Giordano**
 82 Street Address (P.O. Box Number is Not Acceptable)
8397 Bonita Isle Dr.
 83
 84 City **Lake Worth, FL** 85 Zip Code **33467**

11. Pursuant to the provisions of Sections 607.0500 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* **DANIEL R. GIORDANO** 7-29-96
Signature typed in printed name of registered agent and board applicable. (NOTE: Registered Agent signature required when necessary.)

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT	<input type="checkbox"/> DELETE
NAME DANIEL R. GIORDANO	
STREET ADDRESS 8397 BONITA ISLE DR.	
CITY - ST - ZIP LAKE WORTH, FL. 33467	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE PRESIDENT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS 000001913580	
54 CITY - ST - ZIP -08/06/96--01074--005	
55 CITY - ST - ZIP ***225.00	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
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 119.07(3)(k), Florida Statutes. I further certify that the information included 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 617, 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* **DANIEL R. GIORDANO** 7/14/96 (407) 964-6647
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)