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

PROFIT' CORPORATION ANNUAL REPORT





FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # & 70450

FILED

97 NOV 10 AMIL: 20

SOCHEDEN OF STATE WILKEVASSEE, FLORIDA

D.R.G.	Associated	Enterprises,	Tno
~	**************************************	DILLOT DI TOCO!	2110

Principal Place of Business

Mailing Address

	Bonita I Worth, F		Same					
Lake	WOLLII, F.	L 33467				3. Date Incorporated or Qualified	3a. Date of Last Report	
						11/17/83	1	
2. Principal F	lace of Business	2a.	Mailing Address			4. FEI Number	Applied For	
21		26				59-2356010	Not Applicable	
Suite, Apt.	#, etc.		Suite, Apt #, etc				¢0.75	
22		27				5. Certificate of Status Desired	Fee Required	
City & Stat	0		City & State			6. Election Campaign Financing	<b>\$5.00</b> May Be	
23		28	28		Trust Fund Contribution	Added to Fees		
Zip			Zip Country		B. This corporation has liability for in			
24	25	29		30				
		dress of Current Regis	tered Agent		10. Name and Address of New Registered Agent			
				8	Name			
Danie	el Giorda:	no		-				
				82	82 Street Address (P.O. Box Number is Not Acceptable)			
	8391 Bonita Isle Dr Lake Worth, FL 33467			<del></del>				
Dake	WOLCH, F.	L 33401		]"	7			
				84	City		85 Zip Code	
					1		<u>FL</u>	
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 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							}	
	Signature, typed or printed	name of registered ago: I and Idio			ent signalure rei	quired when re-ristating)	DATE	
12.		OFFICERS AND DIREC		13.	<del>-</del>	ADDITIONS/CHANGES TO OFFIC		
TITLE	Pres		DELETE	1.1 TITLE	۸ ا		☐ Change ☐ Addition	
NAME	Daniel (	Giordano		1.2 NAME	1			
STREET ADDRESS 8391 Bonita Isle Dr			13 STREE	1 AUDRESS	5000023	467355		
CITY-ST-ZIP		cth, FL 334		1.4 CITY-	S] - ZIP	-11/13/9	3701085 <b>01</b> 8	
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NAME				3.2 NAML				
STREET ADDRESS					I ADDRESS			
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NAME				5 2 NAME				
STREET ADDRESS				5.3 STREE	LADDRESS			
C(TY-ST-ZIP				5.4 CDY-	S1 7IP			
TITLE			☐ DETELE	6111111	[		Change  Addition	
NAME				6.2 NAME	1		60 11/2-97	
STREET ADDRESS				6.3 \$1H68	T ADDRESS		11/18	
CITY - ST - ZIP			_	6.4 CHY	\$1 - 7 P		. 11 ">	
14. I do here	by certify that the inf	Amation supplied with the	is fing decernot qual	ify for the ex	emption stat	ed in Section 119.07(3)(i). Florida Statutes	. I further certify that the	

information indicated on the annual report or supplemental arius report is true and accurate and that my signature shall have the same logal effect as it made under oath; that I am an officer or director of the corporation or the re-civer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or block 3 if changed 3 of 12 attachment with an address.

SIGNATURE

√ Daniel Giordano

11-7-97

CR2E034 (9/96)

(A)

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE

**NOVEMBER 4, 1997** 

DRG ASSOCIATED ENTERPRISES, INC. 8391 BONITA ISLE DR. LAKE WORTH, FLORIDA 33467 # G70450

TO WHOM IT MAY CONCERN;

THIS IS TO BRING TO YOUR ATTENTION THAT MY CORPORATION WAS NOT SENT A RENEWAL FOR 1997.

LAST YEARS RENEWAL WAS PAID AND A NEW ADDRESS WAS SENT TO YOU AT THAT TIME.

I BELIEVE THE POST OFFICE ALSO DID NOT FORWARD MY RENEWAL IF YOUR OFFICE SENT IT TO MY OLD P.O. BOX IN POMPANO BEACH, FLORIDA. PLEASE ACCEPT MY PAYMENT FOR MY CORPORATION, AS I'VE HAD THIS BUSINESS SINCE 1983.

THE ABOVE ADDRESS IS CURRENT AND PERMANENT AND HAS BEEN SINCE SEPTEMBER 1996.

THANK YOU IN ADVANCE FOR YOUR COOPERATION.

DANIEL R. GIORDANO