

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

FILED

Mar 24 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 398115 (6)
1. Corporation Name
DR ENTERPRISES, INC.



Principal Place of Business 5280 N.W. 167 ST. MIAMI LAKES FL 33014 US	Mailing Address 5280 N.W. 167 ST. MIAMI LAKES FL 33014 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 12349 S.W. 53 Street Suite, Apt. #, etc. 22 Suite 201 City & State 23 Cooper City, FL Zip 24 33330		2a. Mailing Address 26 12349 S.W. 53 Street Suite, Apt. #, etc. 27 Suite 201 City & State 28 Cooper City, FL Zip 29 33330		3. Date Incorporated or Qualified 03/24/1972		4. FEI Number 59-1410147		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		8. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		6. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		7. \$8.75 Additional Fee Required		5. \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent SEMET, BARRY N. 201 ALHAMBRA CIRCLE SUITE 1200 CORAL GABLES FL 33134				10. Name and Address of New Registered Agent 81 Name Barry N. Semet 82 Street Address (P.O. Box Number is Not Acceptable) 100 S.E. Second Street 83 17th Floor 84 City Miami FL 85 Zip Code 33131			
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE		1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	RICH, DAVID			1.2 NAME			
STREET ADDRESS	5280 N.W. 167 ST			1.3 STREET ADDRESS	12349 S.W. 53 Street		
CITY-ST-ZIP	HIALEAH FL			1.4 CITY-ST-ZIP	Cooper City, FL 33330		
TITLE	TSD	<input type="checkbox"/> DELETE		2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	RICH, NAN			2.2 NAME			
STREET ADDRESS	5280 NW 167TH ST			2.3 STREET ADDRESS	12349 S.W. 53 Street		
CITY-ST-ZIP	HIALEAH, FL 00000			2.4 CITY-ST-ZIP	Cooper City, FL 33330		
TITLE	AS	<input type="checkbox"/> DELETE		3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	RICH, JENNIFER			3.2 NAME			
STREET ADDRESS	5280 NW 167TH ST			3.3 STREET ADDRESS	2448 Pinchurst		
CITY-ST-ZIP	MIAMI LAKES FL			3.4 CITY-ST-ZIP	Weston, FL 33332		
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: David Rich, Pres David Rich 3/20/98 (1954) 434-2121

CR2E034 (10/97)