## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 26, 2004 08:00 AM **DOCUMENT # F02000004851 Secretary of State** 1. Entity Name D.C.R.R., INC. Mailing Address Principal Place of Business 1521 ALTON RD. 1521 ALTON RD. #208 #208 MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139 No Chg-P CR2E034 (10/03) 04192004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 23-3062865 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MUNROE, W. BRADLEY ESQ DO NOT WRITE 239 E VIRGINIA STREET TALLAHASSEE, FL 32301 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. DATE Signature, typed or printed name of registered agent and little if applicable. (NOTE. Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 U00000128109 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 26/04-80024-024 150.00 OFFICERS AND DIRECTORS 10. PSTC TITLE RUTENBERG, JILL NAME 1521 ALTON RD. #208 STREET ADDRESS CITY - ST - ZIP MIAMI BEACH, FL 33139 TITLE NAME STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-7IP TITLE

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

Jill Rutenberg, President

4/21/04

FILED

305-532-2299