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Mar 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F88543 (6)

1. Corporation Name
DMR MACHINE, INC.



Principal Place of Business

Mailing Address

~~10750-B ENDEAVOUR WAY~~
LARGO FL-34647-

~~10750-B ENDEAVOUR WAY~~
LARGO FL 33777-1622

3. Date Incorporated or Qualified 06/28/1982
3a. Date of Last Report 04/16/1996

2. Principal Place of Business

2a. Mailing Address

21 10801 ENDEAVOUR WAY

26 10801 ENDEAVOUR WAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 UNIT E

27 UNIT E

City & State

City & State

23 Zip 33777

Country

28 Zip 33777

Country

24 33777

25

29 33777

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MITCHELL, ROBERT
~~10750 ENDEAVOUR WAY~~
LARGO, FL
~~34647~~

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

10801 ENDEAVOUR WAY

83 UNIT E

84 City

FL

85 Zip Code

33777

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

Signature typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PTSD
NAME MITCHELL, DEBORAH A.
STREET ADDRESS 8044 13TH AVE SO.
CITY-ST-ZIP ST PETERSBURG FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 10835 INDIAN HILLS CT. Apt #20
1.4 CITY-ST-ZIP LARGO, FL. 33777

TITLE VD
NAME MITCHELL, ROBERT E.
STREET ADDRESS 8044 13TH AVE SO.
CITY-ST-ZIP ST PETERSBURG FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 10835 INDIAN HILLS CT. Apt #20
2.4 CITY-ST-ZIP LARGO, FL. 33777

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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: Deborah A. Mitchell DEBORAH A. MITCHELL 2/26/97 88544-8807
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)