

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # F95000005154 (8)

1. Corporation Name
DCI OF TAMPA, INC.



Principal Place of Business: **4522 SPRUCE STREET. #103 TAMPA FL 33607**
Mailing Address: **4522 SPRUCE STREET. #103 TAMPA FL 33607**

3. Date Incorporated or Qualified 10/23/1995	3a. Date of Last Report
4. FEI Number 59-3330966	Applied For <input type="checkbox"/> Not Applicable
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 type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21] Suite, Apt. #, etc.	26] Suite, Apt. #, etc.
22] City & State	27] City & State
23] Zip	28] Zip
24] Country	29] Country
25]	30]

9. Name and Address of Current Registered Agent
**CRAIG WARREN
4522 SPRUCE STREET, #103
TAMPA FL 33607**

10. Name and Address of New Registered Agent

81 Name	JACQUELINE M. ROJAS
82 Street Address (P.O. Box Number is Not Acceptable)	3006 W. JEAN STREET
83	
84 City	TAMPA
85 State	FL
Zip Code	33614

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: *Jacqueline M. Rojas* DATE: **1/26/96**

12. OFFICERS AND DIRECTORS

TITLE	PC	<input type="checkbox"/> DELETE
NAME	CRAIG WARREN	
STREET ADDRESS	4522 SPRUCE STREET	
CITY-ST-ZIP	TAMPA FL 33607	
TITLE	V	<input type="checkbox"/> DELETE
NAME	MOHAN, KEITH K	
STREET ADDRESS	4522 SPRUCE STREET	
CITY-ST-ZIP	TAMPA FL 33607	
TITLE	S	<input type="checkbox"/> DELETE
NAME	WILLIAMS, JAMES G	
STREET ADDRESS	4522 SPRUCE STREET	
CITY-ST-ZIP	TAMPA FL 33607	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	GARNER, AUDREY	
STREET ADDRESS	4522 SPRUCE STREET	
CITY-ST-ZIP	TAMPA FL 33607	
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

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	T ROJAS, JACQUELINE M.
4.3 STREET ADDRESS	3006 W. JEAN ST.
4.4 CITY-ST-ZIP	TAMPA, FL 33614
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 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: *James G. Williams* DATE: **1/26/96** (813)879-8765

CR2E034 (12/95)