		PLEASE READ	ALL INST	RUCTIONS	BEFORE C	OMPLET	ING THIS FO	RM.	
	PLICAT FOR ISTATEI	^2	31	A DEPARTMENT OF STATE Jim Smith Secretary of State IVISION OF CORPORATIONS			FILED		
DOCUMENT # F9700005639 1. Corporation Name DTR ASSOCIATES, INC. OF MASSACHUSETTS							02 NOV 25 AM 9: 42 SECRETARY OF STATE TALLAHARSEE FLORIDA		
Principal Place of Business Mailing Addr TO CALIFORNIA AVE. 150 E. PALM FRAMINGHAM MA 01701 BOCA RATO			METTO PARK RD.: STE 700		300009198423				
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, 195 City & State City & State				ng Office Address, If Keyn Sound R etc.		Date Incorp	02-01028-0 orated or Qualified ness in Florida	10/27/1997 Applied For Not Applicable	
MALI bollough, MA BOCO M Zip Country SA Zig 3348" 7. Names and Street Addresses of Each Officer and/or Director (Flo				Centificate			OF STATUS DESIRED	S8.75 Additional Fee required	
Title(s)	Name of Officers and/or Directors			Street Address of Each Officer and/or Director			City / State / Zip		
CTD	GRILLO, VICTOR SR			150 E. PALMETTO PARK RD. Suct. 195			_ BOCA RATON FL 33432 _ 33484		
P	WYSOCKI, RAYMOND J JR			10 CALIFORNIA AVE. 45 RARTIETT STROOT			FRAMINGHAM MA 01701- MARIBOROUM, MA 01752		
- sy - - 5	GELLER, BETH M Gail MODEL			150 E. PALMETTO PARK RD-951 Bes					
٧				10 CALIFORNIA AVE. 45 Bartlett Street			FRAMINGHAM MA 01701 MARIBUROUGH, MA 01752		
V.	ANDERSON, MARK			10-GALIFORNIA AVE:			FRAMINGHAM MA		
٧	RYAN, CATHY			10 CALIFORNIA AVE. 45 Bart lett Steet			FRAMINGHAM MA 01701 Mari borouch MA 0,752		
	8. Nam	e and Address of Current F	legistered Age	nt	Name , ,	9. Name and A	Address of New Regis	tered Agent	
BOCA RATON FL 33492					Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. 195 City State ZipCode,				
10. I, being Signature of Registered	: (e registered ageny of the above		ration, am familiar wit		SOLOY\ bligations of Section	on 607.0505, F.S. or 6	17.0505, F.S.	

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-11-02 561-999-9441



November 11, 2002

VIA REGULAR MAIL

Division of Corporations
Annual Report/Reinstatement Section
PO Box 6327
Tallahassee, FL 32314-6327

Re: DTR Associates, Inc. of Massachusetts Document # F9000005639

Dear Sir or Madam:

Be advised that the above company seeks waiver of the reinstatement fee because the corporation did not receive the two prior uniform business report notices.

Enclosed is the required \$150.00 fee for a for-profit corporation to the file the report without penalty as well as the Application for Reinstatement.

If you have any questions or need additional information, please feel free to contact me.

Sincerely,

DTR ASSOCIATES, INC.

Victor N. Grillo

Director/Chief Executive Officer

Enclosure

. 50 . . .