

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED  
Aug 04 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **H89131** (7)  
1. Corporation Name  
**ENTERPRISE HOLDINGS, CORP.**

Principal Place of Business  
**13320 S.W. 128TH ST  
MIAMI FL 33186**

Mailing Address  
**13320 S.W. 128TH ST  
MIAMI FL 33186**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>10111 Vestal Ct</b> Suite, Apt. #, etc. <b>22</b>		2a. Mailing Address <b>Same</b> City & State <b>28</b>		3. Date Incorporated or Qualified <b>12/10/1985</b>	3a. Date of Last Report <b>02/01/1996</b>
City & State <b>Coral Springs</b>		City & State <b>Same</b>		4. FEI Number <b>59-2611816</b>	Applied For <input type="checkbox"/> Not Applicable
Zip <b>33071</b>		Zip <b>33071</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
Country <b>Broward</b>		Country <b>FL</b>		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

g. Name and Address of Current Registered Agent <b>SINGER, DAVID H. 13320 S.W. 128TH ST MIAMI FL 33186</b>		10. Name and Address of New Registered Agent <b>81 Name Peter Daniels</b> <b>82 Street Address (P.O. Box Number is Not Acceptable) 10111 Vestal Ct</b> <b>83 City Coral Springs</b> <b>84 State FL</b> <b>85 Zip Code 33071</b>	
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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 607.0501, Florida Statutes.

SIGNATURE **Peter R. Daniels** DATE **7/14/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>D</b>	NAME <b>MITCHELL, JUDIE</b>	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>13320 SW 128TH STREET</b>	CITY-ST-ZIP <b>MIAMI FL</b>	1.2 NAME	
TITLE <b>D</b>	NAME <b>DANIELS, PETER</b>	1.3 STREET ADDRESS <b>10111 Vestal Ct</b>	
STREET ADDRESS <b>13320 SW 128TH STREET</b>	CITY-ST-ZIP <b>MIAMI FL</b>	1.4 CITY-ST-ZIP <b>Coral Springs 33071</b>	
TITLE <b>D</b>	NAME <b>HALPERSON, PETER G.</b>	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>13320 SW 128TH STREET</b>	CITY-ST-ZIP <b>MIAMI FL</b>	2.2 NAME	
TITLE <b>D</b>	NAME <b>HALPERSON, PETER G.</b>	2.3 STREET ADDRESS <b>10111 Vestal Ct</b>	
STREET ADDRESS <b>13320 SW 128TH STREET</b>	CITY-ST-ZIP <b>MIAMI FL</b>	2.4 CITY-ST-ZIP <b>Coral Springs 33071</b>	
TITLE <b>D</b>	NAME <b>HALPERSON, PETER G.</b>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>13320 SW 128TH STREET</b>	CITY-ST-ZIP <b>MIAMI FL</b>	3.2 NAME	
TITLE <b>D</b>	NAME <b>HALPERSON, PETER G.</b>	3.3 STREET ADDRESS	
STREET ADDRESS <b>13320 SW 128TH STREET</b>	CITY-ST-ZIP <b>MIAMI FL</b>	3.4 CITY-ST-ZIP	
TITLE <b>D</b>	NAME <b>HALPERSON, PETER G.</b>	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>13320 SW 128TH STREET</b>	CITY-ST-ZIP <b>MIAMI FL</b>	4.2 NAME	
TITLE <b>D</b>	NAME <b>HALPERSON, PETER G.</b>	4.3 STREET ADDRESS	
STREET ADDRESS <b>13320 SW 128TH STREET</b>	CITY-ST-ZIP <b>MIAMI FL</b>	4.4 CITY-ST-ZIP	
TITLE <b>D</b>	NAME <b>HALPERSON, PETER G.</b>	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>13320 SW 128TH STREET</b>	CITY-ST-ZIP <b>MIAMI FL</b>	5.2 NAME	
TITLE <b>D</b>	NAME <b>HALPERSON, PETER G.</b>	5.3 STREET ADDRESS	
STREET ADDRESS <b>13320 SW 128TH STREET</b>	CITY-ST-ZIP <b>MIAMI FL</b>	5.4 CITY-ST-ZIP	
TITLE <b>D</b>	NAME <b>HALPERSON, PETER G.</b>	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>13320 SW 128TH STREET</b>	CITY-ST-ZIP <b>MIAMI FL</b>	6.2 NAME	
TITLE <b>D</b>	NAME <b>HALPERSON, PETER G.</b>	6.3 STREET ADDRESS	
STREET ADDRESS <b>13320 SW 128TH STREET</b>	CITY-ST-ZIP <b>MIAMI FL</b>	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 unchanged, or on an attachment with an address.

SIGNATURE **Peter R. Daniels** DATE **7/14/97**

CR2E034 (4/97)