FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Jan 31 1997 8:00am Secretary of State

DOCUI 1. Corporation	MENT # J22535 D G INVESTMENTS, INC.	DIVISION OF	CORPORA	TIONS		
Principal Place % C.N. GROSS. 4600 ALBRITTO ST. CLOUD FL	. JR. N RD.	Mailing Address % C.N. GROSS, JR. 4600 ALBRITTON RD. ST. CLOUD FL 34772-7204				1861
01. 00000 12	•••••	0 01000 12 41112 120	`		3. Date Incorporated or Qualified 3a. Date of Last Report 07/03/1986 03/14/1996	rt
2. Principal Pl	ace of Business	2a. Mailing Address 26		 	4. FEI Number Applie 59-2695265 Not Ap	d For opticable
Suite, Apt.	t, elc	Suite, Apt. #, etc.			5. Certificate of Status Desired Section 5.	
City & State	}	City & State			B. Election Campaign Financing \$5.00 May Trust Fund Contribution Added to Financian Added to F	
Zip	Country	Zip	Zip Country		8. This corporation has liability for intangible tax under s. 199	
24	25] 9. Name and Address of Curri	29	30		Florida Statutes Yes No 10. Name and Address of New Registered Agent	
	ALBRITTON RD. CLOUD FL 32769		ļ	82 Street 83 84 City	Address (P.O. Box Number is Not Acceptable)	6
			ĺ		FL []	
SIGNATURE	Signatury typed or printed name of registered a	gen and title applicable. (NC	TE Regislered	Ageni signaturi	corporation submits this statement for the purpose of changing its re- poration's board of directors. I hereby accept the appointment as regi- e required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	N 12
NAME STREET ADDRESS CITY-ST-ZIP	GROSS, C.N., JR. 4600 ALBRITTON RD. ST. CLOUD FL	DELETE			OST BChange L Gross, d.N. Jr. 25 E. 17th St. St. Clead, FL. 34769] Addition
TITLE NAME STREET ADDRESS	D GROSS, DARLENE, Y. 4600 ALBRITTON RD. ST. CLOUD FL	DELETE	2.1 TIT 2.2 NA 2.3 STE	LE Me Reet address	Change _	Addition
CITY-SI-ZIP TITLE NAME STREET ADDRESS	01. 02.000 10	DELETE	3.1 TIT 3.2 NA 3.3 STE	ME REET ADDRESS		Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		DELETE	4.1 T(T 4.2 NA 4.3 ST	ime Reet address	Change _	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		DELETE	5.1 T(T 5.2 NA		Change _	Addition
DITY-ST-ZIP TITLE NAME STREET ADDRESS		DELETE	6.1 TIT 6.2 NA		Change	Addition
CITY-ST-ZIP 14. I do herek informatio	by certify that the information suppl n indicated on this annual report or	ied with this filing does not qua supplemental annual report is		Y-ST-VIP exemption of courain and	stated in Section 119.07(3)(i), Florida Statutes. I further certify that the dithat my signature shall have the same legal effect as if made under resort as required by Chapter 607, Florida Statutes; and that my name	oath; that