2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Aug 26, 2005 08:00 AM Secretary of State

DOCUMENT # K19677 1. Entity Name D.M.R. ENTERPRISES, INC.				560	cretary of State	
Principal Place of Business 1700 OVERSEAS HWY, MARATHON, FL 33050 US	Mailing Address 1700 OVERSEAS HWY. MARATHON, FL 33050 US			:	T BEFOR FINIT WENT BIRTH SING WININGS OF INST	
DO NOT WRITI		CE	08032005 4. FEI Numbe 65-003	No Chg-P	CR2E034 (10/03) Applied For Not Applicable \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MILLER, ROBERT K. 2975 OVERSEAS HWY MARATHON, FL 33050			**	NOT W		
The above named entity submits this statement for the purpose of changing its registered office or registered a the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when				th, in the State of Flo	orlda. I am familiar with, and accept	
FILE NOW!!! FEE IS \$150.00 9. Election Campaign Finar Due by September 7, 2005 Trust Fund Contribution.			in accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AN TITLE D NAME FARMER, DONNA L STREET ADDRESS 1700 OVERSEAS HWY CITY-ST-ZIP MARATHON, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D DIRECTORS				0977170 -80003-003 150.00	
STREET ADDRESS CITY-ST-ZIF		-		NOT W		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			IIN			

12. Thereby certify that the Information supplied with this filter does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information stated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an office or director of the corporation or the receiver or trustee empowered of execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ONLA A. HO

NAME STREET ADDRESS

FICER OR DIRECTOR

8-22-05

305-743-3448