


2006 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
May 16, 2006 08:00 AM
Secretary of State

DOCUMENT # K61127 1. Entity Name D.T. OF FORT LAUDERDALE, INC.	
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Principal Place of Business 700 E DANIA BCH BLVD #202 DANIA, FL 33004	Mailing Address 700 E DANIA BCH BLVD #202 DANIA, FL 33004
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DO NOT WRITE IN THIS SPACE



03162006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0097201	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TOURANGEAU, JACQUES
401 SW 4TH AVENUE, # 301
FORT LAUDERDALE, FL 33315

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOURANGEAU, JACQUES 401 SW 4TH AVENUE # 301 FORT LAUDERDALE, FL 33315
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DUFOUR, GERALD 401 SW 4TH AVENUE, #301 FORT LAUDERDALE, FL 33315
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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05/20/06-80092-006 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jacques Tourangeau 04/21/06 954-463-5718

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #