


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Jan 12, 2007 08:00 AM  
Secretary of State**

<b>DOCUMENT # K61127</b> 1. Entity Name D.T. OF FORT LAUDERDALE, INC.		
Principal Place of Business 700 E DANIA BCH BLVD #202 DANIA, FL 33004	Mailing Address 700 E DANIA BCH BLVD #202 DANIA, FL 33004	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  TOURANGEAU, JACQUES 401 SW 4TH AVENUE, # 301 FORT LAUDERDALE, FL 33315		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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 DUFOR, GERALD 401 SW 4TH AVENUE, #301 FORT LAUDERDALE, FL 33315	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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: <i>Jacques Tourangeau</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		01/08/07 954-463-5712 Date Daytime Phone #



01032007 No Chg-P CR2E034 (11/05)

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

U00000585220  
01/16/07-80003-003 158.75

**DO NOT WRITE  
IN THIS SPACE**