FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	DIVISION OF C	CORPORATIONS		
1. Corporation	MENT # L7847 Dre, Inc.	7 2 (2)			
UL 114K	ML, IIIO.		,	!	HAN BAN DIDIR DIDIR DAN ANDI DAN DIDIR HAN
Principal Place	of Business	Mailing Address	 	[
1134 CHATEAU PARK DRIVE		1134 CHATEAU PARK D	RivF		
	DALE FL 33311	FT. LAUDERDALE FL 33			
*** - · · · · · · · · · · · · · · · · ·				3. Date Incorporated or Qualified 06/07/1990	3a. Date of Last Report 05/01/1995
2. Principal Pla 21	ace of Business	2a, Mailing Address		4. FEI Number 65-0346631	Applied For
Suite, Apt.	#, etc	Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζ _I ρ 24	Country 25	Ζ(ρ 29	Gountry 30	8. This corporation has liability for in	
	9. Name and Address of Curre		30	Florida Statutes Yes 10. Name and Address of New Ro	
			81 Name C	ARTER, JERRY	
CARTER, JERRY 82 Street				ess (P.O. Box Number is Not Acceptabl	le)
1434-CHATEAU-PARK DRIVE— FE-1-A-UDEBDALE-EL-3834 t:			83		
THE LANGE PROPERTY STATE TO			4	4737 N.W. 67TH AVENUE	
			84 City	AUDERHILL	FL 85 Zip Code 33319
 Pursuant to or register 	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor	02 and 607.1508, Florida Statutes,	the above-named corpora	ation submits this statement for the purp d of directors. I hereby accept the appo	ose of changing its registered office
	II, and accept the obligations of, Sec	tion 607.0505, Florida Statutes.		or directors. Thereby accept the appo	intment as registered agent. I am
SIGNATURE _	Signature, typiog or printed name of registered ager	V 11 1 11 P. R. R. T. L. A.	RTER Registered Agent signature required	04/1	.5/96
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	
THILE	PT (CAPTED IEDO)/	☐ DELETE	1 1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS	CARTER, JERRY 4737 NW 67TH AVE		1.2 NAME		
CITY-ST-ZIP	LAUDERHILL FL		1.3 STREET ADDRESS		
TITLE	VS	DELETE	1.4 City-ST-ZiP 2 1 Title		Change Addition
NAME	CARTER, ELLA	-	2.2 NAME		Cl swards Cl vegicen
STREET ADDRESS	4737 NW 67TH AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	LAUDERHILL FL		2.4 CITY - ST - ZIP		
THILE		☐ DELETE	3 1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS			3.2 NAME		
CITY-ST-ZIP			3.3. STREET ADDRESS 3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4 1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.9 STREET ADDRESS		
CHTY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5 1 TITLE		Change Addition
NAME EXPERT APPRECE			5.2 NAME		İ
STREET ADDRESS CITY-ST-ZIP			5.3 STREET ADDRESS		
TITLE	× 	DELETE	5.4 C(TY - ST - Z(P 6 1 T(TLE		Change Addition
NAME			6.2 NAME		T avenue T vegetion
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6 4 CITY - ST - ZIP		
14. I do hereby certify that	certify that the information supplied the information indicated on this ann	with this filing is voluntarily furnish ual report or supplemental annual	ed and does not qualify for report is true and accurate	r the exemption stated in Section 119.0 and that my signature shall have the s	7(3)(k), Florida Statutes. I further ame legal effect as if made under

305-462-3635