

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000021710

1. Entity Name
DTG MANAGEMENT, INC.



Principal Place of Business
1836 MONTE CARLO WAY
CORAL SPRINGS, FL 33071 US

Mailing Address
1836 MONTE CARLO WAY
CORAL SPRINGS, FL 33071 US



04252006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
42-1582025

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WEINBERG, STEVEN
7805 SW 6TH COURT
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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. ☐ \$5.00 May Be Added to Fees

U000000557173
05/17/06-80038-021 150.00

10. OFFICERS AND DIRECTORS

TITLE P,D
NAME CIANCIULLI, STEPHEN
STREET ADDRESS 1836 MONTE CARLO WAY
CITY-ST-ZIP CORAL SPRINGS, FL 33071

TITLE DST
NAME GOBSTEIN, MR. HAROLD
STREET ADDRESS 1836 MONTE CARLO WAY
CITY-ST-ZIP CORAL SPRINGS, FL 330717829

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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: Harold Gobstein, HAROLD GOBSTEIN, Sec'y 4/24/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #