
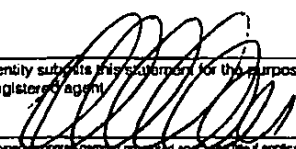
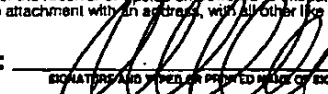


FILED
Feb 16, 2005 8:00 am
Secretary of State

01-21-2005 90083 046 ***150.00

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000038556			
1. Entity Name DRG FLORIDA INVESTMENTS, INC.			
Principal Place of Business 9360 SUNSET DR STE 245 MIAMI, FL 33173		Mailing Address 9360 SUNSET DR STE 245 MIAMI, FL 33173	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 55-0872264		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GONZALEZ, DANIEL 9360 SUNSET DR STE 245 MIAMI, FL 33173		7. Name and Address of New Registered Agent Name: OTTO A. GONZALEZ JR. Street Address (P.O. Box Number is Not Acceptable) 9360 Sunset Drive Suite 245 City: Miami FL Zip Code: 33173	
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:  OTTO A. GONZALEZ, JR., President		DATE: 01/17/05	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P GONZALEZ, OTTO A JR 9360 SUNSET DR STE 245 MIAMI, FL 33173 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  OTTO A. GONZALEZ, JR.		DATE: 01/17/05 (305) 271-4446	