

FOR PROFIT CORPORATION ANNUAL REPORT (AR)

3/23/2006-90020-007-\$61.25-\$61.25

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 MAY 11 AM 8:19

DOCUMENT # P05000076458	
1. Entity Name DTM Corporation of Cape Coral	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1010 SW. 23rd street		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Cape Coral, FL		City & State	
Zip 33991	Country USA	Zip	Country

50005070

CR2E034B (8/05)

4. FEI Number H05000131275	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name Jose G. Preciado	
	Street Address (P.O. Box Number is Not Acceptable) 1010 SW. 23rd street	
	City Cape Coral.	FL Zip Code 33991

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 **Jose G. Preciado** (NOTE: Registered Agent signature required when resigning) DATE **3/12/06**

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended AR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. (President) OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Jose G. Preciado 1010 SW. 23rd street Cape Coral, FL 33991	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Maria D. Preciado (Vice President) 1010 SW. 23rd st. Cape Coral FL 33991	TITLE NAME STREET ADDRESS CITY-ST-ZIP	100075550131 05/31/06--01019--012 **88.75
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: **Jose G. Preciado** DATE **3/12/06** **239-645-3152**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DAYTIME PHONE #