

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 FEB - 1 AM 11: 13

DOCUMENT # P93000003527 (7)

1. Corporation Name  
DASA ENTERPRISES, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business      Mailing Address  
2000 TOWERSIDE TERRACE      2000 TOWERSIDE TERRACE  
# 1101      # 1101  
MIAMI FL 33138      MIAMI FL 33138

3. Date Incorporated or Qualified      3a. Date of Last Report  
01/11/1993      05/01/1994

2. Principal Place of Business      2a. Mailing Address

4. FEI Number      Applied For  
65-0404320      Not Applicable

22. Suite, Apt. #, etc.      27. Suite, Apt. #, etc.

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

23. City & State      28. City & State

6. Election Campaign Financing Trust Fund Contribution      \$5.00 May Be Added to Fees

24. Zip      25. Country      29. Zip      30. Country

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes       Yes       No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROTEM, ELI  
2000 TOWERSIDE TERRACE  
# 1101  
MIAMI FL

01 Name  
02 Street Address (P.O. Box Number is Not Acceptable)  
03  
04 City      05 Zip Code  
FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

NOTE: Registered Agent signature required when re-registering.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PSD
NAME	ROTEM, ELI
STREET ADDRESS	2000 TOWERSIDE TERR., # 1101
CITY-ST-ZIP	MIAMI FL 33138
TITLE	VD
NAME	ROTEM, EDITH
STREET ADDRESS	2000 TOWERSIDE TERR., # 1101
CITY-ST-ZIP	MIAMI FL 33138
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(4), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13, unchanged, or on an attachment with an address.

SIGNATURE: *E. Rotem*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/95

Daytime Phone #