


FILED

May 12 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P93000073146 (1)  
1. Corporation Name  
P.D.K. ENTERPRISES, CORP.

Principal Place of Business  
5700 COLLINS AVE  
#8-C  
MIAMI BEACH FL 33140

Mailing Address  
5700 COLLINS AVE  
#8-C  
MIAMI BEACH FL 33140-2308

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country

3. Date Incorporated or Qualified  
10/21/1993  
3a. Date of Last Report  
04/12/1996  
4. FEI Number  
65-0444793  
5. Certificate of Status Desired  
6. Election Campaign Financing  
Trust Fund Contribution  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

9. Name and Address of Current Registered Agent  
M&C ACCOUNTING SERVICES, INC.  
801 W. 49TH ST.  
SUITE 226  
HIALEAH FL 33012

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code

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, printed name of registered agent and title if applicable  
(NOTE: Registered Agent signature required when reinstating)  
DATE


12. OFFICERS AND DIRECTORS  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if provided, or on an attachment with an address.

SIGNATURE

May 12 1997 8:00am  
Secretary of State



4-28-97 (305) 822-4299