FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000077469** (3)

DHR ENTERPRISES, INC.

FILED Feb 07 1997 8:00am Secretary of State

Principal Place of Business 555 N.E. 15TH ST. #29C MIAMI FL 33132 US		Mailing Address 555 NE 15 ST STE. 29C MIAMI FL 33132-1432 US			3. Date Incorporated or Qualified	3a. Date of	Last Re		
					11/09/1993	02/15/1	996	,	
2. Principal F	tace of Business	2a. Mailing Address 26			4. FEI Number 65-0446766			plied For Applicable	
Suite, Apt	#. etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		8.75 A Fee Red	dditional quired	
		City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zφ	Country	Zip	Country	,	a. This corporation has liability or i	nta tgible tax u		199.032.	
24	25		30			Yes No			
	9. Name and Address of Cu	irrent Registered Agent		·	10. Name and Address of New Re	istered Ager	<u>ıt</u>		
	NICK, DAVID		81	Name					
	NE 15 ST		82	Street Add	dress (P.O. Box Number is Not Acceptab	le)			
#29 Miai	C VH FL 33132		83						
			84	City		85	Zip C	`rvta	
				,	rporation submits this statement for the pation's board of directors. I hereby accep	FL	1		
12 .	Sty also hybertor profeduars of rigider OFFICERS	AND DIRECTORS	13.	or it organizate requ	ulred when reinstating) ADDITIONS/CHANGES TO OFFIC				
TITLE	PUST RUDNICK, DAVID	[_] DELETE	11 TITLE			L) (Change	Addition	
NAME	555 NE 15 ST.		1.2 NAME	400000					
STREET ADDRESS	MIAMI FL			ADDRESS					
C(TY+S)+2)P TITLE		DELETE	1.4 CITY - S 2.1 TITLE	31-211			Change	Additio	
NAME			2.2 NAME				· · · · · · · · · · · · · · · · · · ·		
STREET ADDRESS			2.3 STREE	ADDRESS	·				
Crty - ST- ZIP			2. 4 CITY-	ST-ZIP					
7012		☐ DELETE	3.1 TITLE				Change	Addition	
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE						
CHY+ST-7P		DELETE	34. CITY-	ST-ZIP	THE STATE OF THE S		Change	Addition	
THLE NAME		F-1 PETELE	4 1 TITLE 4 2 NAME			<u></u> ,	אושוואנ	L AUGIGOI	
STREET ADDRESS			4.3 STREE	1					
CITY-S1-ZIF			4.4 CITY - 1						
TITLE		DELETE	5.1 TITLE				Change	Addition	
NAMÉ			5.2 NAME						
STREET ADDRESS		•	5.3 STREE	ADDRESS					
CITY-ST-ZIP			5.4 CITY-5	ST - ZIP					
THILE		DELETE	6.1 TITLE				Change	Addition	
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREE	ADDRESS					
CITY: \$1-ZiP			6.4 CITY-3	T-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 changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-1-97

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