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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sanora B. Mortham
Secretary of State
D-VISION OF CORPORATIONS

-KININ		LILI
	19	96

DOCUMENT # P94000031856 (5)

D.T.R. ENTERPRISES, INC.

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Principal Place of	of Business	Mading Address		T I DE TILE DE LE LE LE COURT DE LA COURT	OBSIN DOTOR INCOLUSION INCOLUSION DITE SUEN
5780 OKEECHOBEE BLVD. WEST PALM BEACH FL 33460		5780 OKEECHOBEE BLV WEST PALM BEACH FL			
				3. Date incorporated or Qualified 04/27/1994	3a. Date of Last Report 03/07/1995
2. Principal Plac	ce of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26	· · · · · · · · · · · · · · · · · · ·	65-0501257	Not Applicable
Suite, Apt. #	, etc.	Suite Apt. #, etc	,,,,	5. Certificate of Status Desired	\$8.75 Additional Fee Required
Oity & State	,	Oity & Starc [28]		Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
<i>Ζ</i> ιρ 24	Country 25	Zη∍ 29	Country 30		□No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New F	Registered Agent
			81 Name		
MEISEL,	KEITH W		82 Street Add	ress (P.O. Box Number is Not Acceptat	oie)
400 S. A	JUSTRALIAN AVE.		7/1	U.S. Highway ove	- SUITE 230
SUITE 72			83	- <i>D</i> 0	
WEST PA	ALM BEACH FL 33401		84 Oty ,		85 Zip Code
			 	ORTH PALM BEACH	FL 33468
11. Pursuant to	the provisions of Sections 607,0502	and 607.1508, Florida Statutes	The above named corpo	ration submits this statement for the pu	rpose of changing its registered office
or registere familiar with	ed agent, or both, in the State of Hond in and accept the Daligations of Section	ia <u>Such changs</u> was abroomed on 607,0505. Horida Statutes.	Lary the corporation's boa	ed of directors. Thereby accept the app	Militaria de la registere d'agent. Lam
					4/12/96
SIGNATURE	signature typed or period out a cliniques, facility	a will the diamental of the Court of the	Forgette est Apert Sognative temper-		(A)E
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TITLE	D	DEL FIE	* * TITLE		Change Addition
NAME	ROACH, DALE A JR.		2 NAME		
STREET ADDRESS	5780 OKEECHOBEE BLVD.		1 3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 3346	0	14 CrTY - ST - Zir		
TITLE		□ DELETE	2 1 THLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CHY-ST ZiP		
TITLE		☐ DELETE	3 1 10 LE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		:
CITY-ST-ZIP			34 CHY ST ZIP		
TITLE		☐ DELETE	4 1 THELE		☐ Change ☐ Addition
NAME			12 NAME		
STREET ADDRESS			13 STREET ADDRESS		
CITY-ST-ZIP			4.4.0(1) y - \$1 - 2(F		
TIFLE		☐ DELETE	5 1 TITLE		Change 🔲 Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY+S1+ZiP		
THLE		DELFTE	6 1 THILE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CILV CT 710			64 001 V + \$1 - 712		

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 119.07(3)(k), 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 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(407) 688-5117 Date Phone #

CR2E034 (12/95)