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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortnam

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name	P94000040185	(8)
F		

DILLON ENTERPRISES, INC.



•	of Business	Mailing Address			
	TA OAK COURT	6603 GEMINATA OA			
PALM BEACH	GARDENS FL 33410	PALM BEACH GARD	DENS FL 33410		
				3. Date Incorporated or Qualified 05/27/1994	3a. Date of Last Report 06/01/1995
2. Principal Place	ce of Business	2a. Mailing Address	2.1	4. FEI Number 65-0494 1 19	Applied For Not Applicable
21 Suito Apt #	olo	26			\$8.75 Additional
Suite, Apt. #.	, etc.	27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	
24	25	29	30	Florida Statutes 2 Yes 10. Name and Address of New I	S No
	9. Name and Address of Cur	rent Registered Agent	81 Name	10, Name and Address of New I	Hegistores Agent
DILL ON	DOMALD D				
	Donald B Mrinata Oak Ct		82 Street Ac	ddress (P.O. Box Number is Not Accepta	piej
	EACH FL 33410		83		
1 ACM BC	2701112 00110		04 04		85 Zip Code
			84 City		FL B5 Zip Code
	Signature, typied or print-dinamic of register, La	AND DIRECTORS	if the High-tored Agent Squat is non-		DATE FICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1 111/16	APENTIONS OF MARKET TO CA	Change Addition
THERE					Change Change
MAME	DILLON, DONALD B	_	1.2 NAME		Criange C Radition
NAME STREET ADDRESS	DILLON, DONALD B 6603 GEMINATA OAK CO				Cominge C Adminos
STREET ADDRESS	DILLON, DONALD B 6603 GEMINATA OAK CO PALM BEACH GARDENS	OURT	L2 NAME		
	6603 GEMINATA OAK CO	OURT	L2 NAME L3 SYREEF ADDRESS		
STREET ADDRESS CITY+S1+ZIP	6603 GEMINATA OAK CO	OURT FL 33410	I 2 NAME 1 3 SMEET ADDRESS 1,4 CITY+ST+ZIP		
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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 12 or Block 13 if changed in on an attaching at with an address.

SIGNATURE:

4-29-96 407-622-9172