



2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 91014 031 ***150.00

DOCUMENT # P94000073743 1. Entity Name D.T.G. ENTERPRISES, INC.					
Principal Place of Business 6822 RIDGE RD NEW PORT RICHEY, FL 34668 US			Mailing Address 177 DAN RIVER DRIVE SPRING HILL, FL 34606		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 12412 Eclipse Court Suite, Apt. #, etc.		54042370 	
City & State _____		City & State New Port Richey, Florida		4. FEI Number 59-3269774	
Zip _____		Country 34654		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TYNDALL, GLORIA 177 DAN RIVER DRIVE SPRING HILL, FL 34606				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) 12412 Eclipse Court City New Port Richey, FL Zip Code 34654	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TYNDALL, GLORIA 177 DAN RIVER DRIVE SPRING HILL, FL 34606	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	12412 Eclipse Court New Port Richey, FL 34654	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TYNDALL, DONALD B 177 DAN RIVER DRIVE SPRING HILL, FL 34606	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	12412 Eclipse Court New Port Richey, FL 34654	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Gloria Tyndall</i> Gloria Tyndall, Director			4/20/2004		845-3626
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small>		<small>Daytime Phone #</small>