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Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90282 025 ***158.75

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P94000076147

1. Corporation Name
THE DALLAS COMPANY ENTERPRISES, INC.



Principal Place of Business
 1840 W 49TH ST, SUITE 704
 STE 704
 HIALEAH FL 33012
 US

Mailing Address
 1840 W 49TH ST, SUITE 704
 STE 704
 HIALEAH FL 33012
 US

DO NOT WRITE IN THIS SPACE

21	2. Principal Place of Business	2a	Mailing Address
22	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
23	City & State	27	City & State
24	Zip	28	Zip
25	Country	29	Country

3. Date Incorporated or Qualified
 10/17/1994

4. FEI Number
 65-0526757

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

~~RODRIGUEZ, JOSE
 743 W. 34 LANE
 #111
 HIALEAH FL 33018~~

10. Name and Address of New Registered Agent

81 Name
 VIVIAN CARVAJAL-ALFONSO

82 Street Address (P.O. Box Number is Not Acceptable)
 8103 CAMINO REAL APT C113

83

84 City
 MIAMI

85 Zip Code
 FL 33143

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: *Vivian Carvajal-Alfonso*

(NOTE: Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS

TITLE	PSD	<input checked="" type="checkbox"/> DELETE
NAME	RODRIGUEZ JOSE	
STREET ADDRESS	1840 W 49TH ST., STE 704	
CITY-ST-ZIP	HIALEAH FL	
TITLE	PSD	<input type="checkbox"/> DELETE
NAME	VIVIAN CARVAJAL-ALFONSO	
STREET ADDRESS	8103 CAMINO REAL # C.113	
CITY-ST-ZIP	MIAMI FL 33143	
TITLE	TREASURER	<input type="checkbox"/> DELETE
NAME	JOSE RODRIGUEZ	
STREET ADDRESS	7443 W. 34 LANE #111	
CITY-ST-ZIP	HIALEAH, FL 33018	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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 with all other like empowered.

SIGNATURE: *Vivian Carvajal-Alfonso*

4/14/99 (305)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2F034 (1/9/98)