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 # P95000029937 (6)

DVM ENGINEERING SERVICES, INC.

Principal Place of Business

Mailing Address

ONTO OFMELL LAME

0072 SEWELL LANE

FILED

97 JUL -3 PM 1:31

SECRETARY OF STATE TALLAHASSEE, FLORIDA



SPRING HILL F			S	SPRING HILL FL 34608-3968										
										1			te of Last Report	
2. Principal Place of Business				2a. Mailing Address					4.	FEI Number			1	Applied For
21				26						59-3314346			١	Vot Applicable
Suite, Apt. #, etc.			27	Suite, Apt. #, etc.				5.	Certificate of Status Des	ired	X	-	Additional Required	
City & State			28	City & State				6.	Election Campaign Finar Trust Fund Contribution	noing			0 May Be d to Fees	
Zip 24	2!	Country	29	Zip Cou 29 30			try		8.	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
1		nd Address of Cu	rrent Reg	stered Agent					10.	Name and Address of	New Reg	gistered	Agent	
MOC	DRE, DEAN E					- 1	31	Name						
9072 SEWELL LANE						h	32	Street Ac	dress (P	O. Box Number is Not A	cceptab	le)		·
SPR	ING HILL FL	34608				L	33							
						1	84	City					85 Zij	p Code *
								•				FL	. - - '	
SIGNATURE										n submits this statement poard of directors. I hereb	y accep		ointment a	as registered
	Signature, typed or	printed name of register			(NO	TE: Registered	Age	nt signature re				DATE		556 141 46
12.	- N	OFFICERS	S AND DIRE		OCLETE	13.	_			ADDITIONS/CHANGES T	O OFFIC	ERS ANI	Change	
TITLE	MOORE, D	EAN C		النا	DELETE	1.1 TITE							·	
NAME	3106 S FL					1.2 NAM		. 1		20 0 000	022	233	672	29
STREET ADDRESS	INVERNESS							ADDRESS		-07	7097	970	11046-	-U14
CITY-ST-ZIP	D	3 FL 34430			DELETE	1.4 CIT	_	T-ZIP		* *	**16	5,00_	Change	165_00 Addition
TITLE	_	ALEDIE M		البا	DECETE	2.1 HILL 2.2 NAN							L. Onlange	Addition
NAME MOORE, VALERIE M STREET ADDRESS 3106 S FLORIDA AVE								ADDDCCC						
	INREDNICO EL 044EA						2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP							
CITY-ST-ZIP TITLE	111111111111111111111111111111111111111	J 1 & 04400			DELETE	3.1 TiTI	_	51 - 202					Change	e Addition
NAME						3 2 NA								
STREET ADGRESS	İ							ADDRESS						
3114E1 1001433						3.4. CIT								
					DELETE	4.1 TITE		71 - 11					Change	e Addition
NAME *						4 2 NA	ME	,						
STREET ADDRESS						4 3 STR	EET	ADDRESS						
CITY-ST-ZIP						4.4 CIT	Y - S'	T-ZIP						
TITLE					DELETE	5.1 TITI	E						Change	e Addition
NAME						5.2 NAI	ME							
STREET ADDRESS						5.3 STF	EET	ADDRESS						
CITY-ST-ZIP						5.4 CIT	Y - S	T-ZIP						
TITLE					DELETE	6.1 TITI	E						Change	e Addition
NAME					,	6.2 NAI	ΜE						<i>x</i>)	
STREET ADDRESS						6.3 STF	REET	ADDRESS					7/	
CITY-ST-ZIP						6.4 CIT	Y - S	7 - ZIP						
			Albert Mile						A - 41 i - C -	440 07/01/15 Etc. 14	Ctatada	.17: i Zic -	- I I I	- 1 41

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 II there 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.