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FILED
Feb 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000055384 (8)

1. Corporation Name
DLR CONSTRUCTION, INC.



Principal Place of Business
10519 - I SPRINGHILL DRIVE
SPRING HILL FL 34608

Mailing Address
10519 - I SPRINGHILL DRIVE
SPRING HILL FL 34608

3. Date Incorporated or Qualified 07/18/1995	3a. Date of Last Report 03/14/1996
4. FEI Number 59-3322783	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 10525 Spring Hill Dr. Suite, Apt. #, etc.	26 10525 Spring Hill Dr. Suite, Apt. #, etc.
22 City & State	27 City & State
23 Spring Hill, FL 34608	28 Spring Hill, FL
24 34608 25 U.S.A.	29 34608 30 U.S.A.

9. Name and Address of Current Registered Agent
NESSLER, PAUL H JR.
4040 COMMERCIAL WAY
SUITE 4
SPRING HILL FL 34608

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PADRON, DAVID L	1.2 NAME	
STREET ADDRESS	2288 EVONGLOW	1.3 STREET ADDRESS	
CITY - ST - ZIP	SPRING HILL FL 34609	1.4 CITY - ST - ZIP	
TITLE	VP	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PADRON, LAWRENCE	2.2 NAME	
STREET ADDRESS	2288 EVONGLOW	2.3 STREET ADDRESS	
CITY - ST - ZIP	SPRING HILL FL 34609	2.4 CITY - ST - ZIP	
TITLE	ST	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PADRON, ROSEMARY	3.2 NAME	
STREET ADDRESS	2288 EVONGLOW	3.3 STREET ADDRESS	
CITY - ST - ZIP	SPRING HILL FL 34609	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. 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. 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.

SIGNATURE: _____

David L. Padron, President

Date: _____ Daytime Phone # _____

CR2E034 (9/96)