

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**

**Feb 13 1998 8:00am  
Secretary of State**

|  |   |   |
|--|---|---|
| PROFIT CORPORATION<br>ANNUAL REPORT<br><b>1998</b> |  | FLORIDA DEPARTMENT OF STATE<br><b>Sandra B. Mortham</b><br>Secretary of State<br>DIVISION OF CORPORATIONS |
|--|---|---|

**DOCUMENT # P95000078024 (3)**  
 1. Corporation Name  
**DHRAN REAL ESTATE, INC.**



DO NOT WRITE IN THIS SPACE

|   |   |
|---|---|
| Principal Place of Business<br><b>C/O JERRY M. SYROP<br/>                 11154 W. SAMPLE RD<br/>                 CORAL SPRINGS FL 33065-2615<br/>                 US</b> | Mailing Address<br><b>C/O JERRY M. SYROP<br/>                 11154 W. SAMPLE RD<br/>                 CORAL SPRINGS FL 33065-2615<br/>                 US</b> |
|---|---|

|   |   |  |
|---|---|--|
| 3. Date Incorporated or Qualified<br><b>10/06/1995</b>  | Applied For<br><input type="checkbox"/> | Not Applicable<br><input type="checkbox"/> |
| 4. FEI Number<br><b>65-0620378</b>  |   |  |
| 5. Certificate of Status Desired<br><input type="checkbox"/>  | <b>\$8.75 Additional Fee Required</b>   |  |
| 6. Election Campaign Financing Trust Fund Contribution<br><input type="checkbox"/>  | <b>\$5.00 May Be Added to Fees</b>      |  |
| 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.<br><input type="checkbox"/> Yes <input type="checkbox"/> No |   |  |

|   |  |
|---|--|
| 2. Principal Place of Business<br>21 <b>10585 NW 57th Court</b><br>Suite, Apt #, etc. | 2a. Mailing Address<br>26 <b>10585 NW 57th Court</b><br>Suite, Apt #, etc. |
| 22 City & State<br>23 <b>Coral Springs, Florida</b>                                   | 27 City & State<br>28 <b>Coral Springs, Florida</b>                        |
| 24 <b>33076</b> 25 <b>United States</b>   | 29 <b>33076</b> 30 <b>United States</b>                                    |

9. Name and Address of Current Registered Agent  
**SYROP, JERRY M  
 11154 W. SAMPLE RD.  
 CORAL SPRINGS FL 33065**

10. Name and Address of New Registered Agent  
 81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
**10585 NW 57th COURT**  
 83  
 84 **CORAL SPRINGS** **FL** 85 Zip Code **33076-1803**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature typed or printed name of registered agent and fee, if applicable. (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS |   | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |  |
|----------------------------|---|---|--|
| TITLE                      | <b>SDP</b>                                    | 1.1 TITLE   | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | <b>SYROP, JERRY</b>                           | 1.2 NAME  |  |
| STREET ADDRESS             | <b>11154 W. SAMPLE ROAD 10585 NW 57th Ct.</b> | 1.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                | <b>CORAL SPRINGS FL 33076-2803</b>            | 1.4 CITY-ST-ZIP                                       | <b>←</b>   |
| TITLE                      | <input type="checkbox"/> DELETE               | 2.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       |   | 2.2 NAME  |  |
| STREET ADDRESS             |   | 2.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                |   | 2.4 CITY-ST-ZIP                                       |  |
| TITLE                      | <input type="checkbox"/> DELETE               | 3.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       |   | 3.2 NAME  |  |
| STREET ADDRESS             |   | 3.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                |   | 3.4 CITY-ST-ZIP                                       |  |
| TITLE                      | <input type="checkbox"/> DELETE               | 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                      | <input type="checkbox"/> DELETE               | 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                      | <input type="checkbox"/> DELETE               | 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 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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, unchanged, or on an attachment, with an address.

SIGNATURE: **Jerry M. Syrop** **1/5/98** **984 755-1259**

CR2E034 (10/97)