FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

P95000083371 (1)

DOCUMENT #
1. Corporation Name

DMR FULFILLMENT, INC. Dringing Place of Pusiness



	Mailing Address							
550 TECHNOLOGY PARK LAKE MARY FL 32746	550 TECHNOLOGY PA LAKE MARY FL 32746							
					3. Date Incorporated or Qualified 10/25/1995	3a. Date	of Last R	eport
2. Principal Place of Business	2a. Mailing Address				4. FEI Number	20		Applied For
21 2	26				59-335	<u>8911</u>		Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
City & State	City & State				Election Campaign Financing Trust Fund Contribution			O May Be d to Fees
Zip Country 25 2	Zip Country 30				8. This corporation has liability for intangible tax under s 199.032, Florida Statutes			
9. Name and Address of Current Re	gistered Agent				10. Name and Address of New Re	egistered A	gent	
•			81 1	Name				
BĘRMAN, JED 180 S KNOWLES AVE			82 5	Street Addre	ss (P.O. Box Number is Not Acceptabl	le)		
WINTER PARK FL 32789			83					
11. Pursuant to the provisions of Sections 607.0502 and				City		F <u>L</u>		p Code
Pursuant to the provisions of Sections 607.0502 and or registered agent, or both, in the State of Florida. S familian with, and accept the obligations of Section 6 SIGNATURE Signature, typed or printed name of registered agent and fit				ignature required i		DATE		
12. OFFICERS AND DIF	RECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTO	DRS IN 12
TITLE . V, P.	, DELETE	1.11	ITLE] Change	■ Addition
NAME Smith, Barbara	ر ا	1.2 N	AME					
STREET ADDRESS 662 Red Wing	Dr	1.3 ST	TREET AD	DDRESS				
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TITLE P NAME WORSHOP, TONY STREET ADDRESS 630 Pugh St CITY-S1-ZIP Lake Mary FC		2 1 T 22 N 23 Si 24 Ci	TITLE IAME	DDRESS ZIP			Change	Addition Addition
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roo nereby certify that the information supplied with this stilling is voluntarily furnished and does not quality for the exemption stated in Section 118,07(3)(4), Florida Statutes. I furner 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 by 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 charged, or on an attachment with an address.

SIGNATURE: