## 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 # P95000086174 (6)

DATO ENTERPRISES, INC.

Principal Place of Business Mailing Address

4050 SW 126TH AVE., CB111 4050 SW 126TH AVE., CB111

MIRAMAR FL 33027 MIRAMAR FL 33027-2929

## FILED Mar 28 1997 8:00am Secretary of State



						3. Date Incorporated or Qualified	3a. Date of		eport
						11/08/1995	02/23/1	23/1996	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Ap	plied For
26						65-0622187			t Applicable
Suite, Apt. #, etc Suite, Apt. #			etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Sta	ate:	City & State				6. Election Campaign Financing	•	\$5 AA	May Be
23		28				Trust Fund Contribution		Added I	
<b>Ζ</b> φ	Country	Zip	Co	untry		8. This corporation has liability for i			
14	25	29	30				Yes No		199.032,
<u> </u>	9. Name and Address of Curre		30	Т		10. Name and Address of New Re			
		nit riegisteled Agent		81	Name	IV. Hamo and Addition of Ham the	gistered Agei	<u></u>	
HOOPER, LARRY K					or wane				
29625 SW 177TH AVE.					82 Street Address (P.O. Box Number is Not Acceptable)				
HOMESTEAD FL 33030									
				83					
				84	City		<b></b> 85	Zip	Code
						rporation submits this statement for the p	<u> </u>		
agent. I SIGNATURE		-				ation's board of directors. I hereby accep	DATE		
46	Signature, typical or printed name of registered a	gent and tick it applicable (NO) ND DIRECTORS	1E: Hegister		ant aignature requ	uired when reinstating)  ADDITIONS/CHANGES TO OFFICE		ECTOE	C IN 12
<b>12.</b>	PD	DELETE		TITLE		ADDITIONS/CHANGES TO OFFIC		Change	Addition
	· -	beerie	1					⊅iluulle	L. Addition
NAME	WILLIAMS, DIANE			NAME					
STEEF LADURESS		1	1.3	STREET	T ADDRESS				
CHY-SY-ZIP	MIRAMAR FL 33027			CITY - S	ST-ZIP				
TITLE	V	☐ DELETE	2.1	TITLE				Change	Addition
NAME	BRAND, DAVID		2.2	NAME					
STREET ADDRESS	12499 SW 80TH AVE.		2.3	STREET	T ADDRESS				
CHY-S1-ZIP	MIAMI FL 33156		2. 4	CITY-	ST - ZIP				
T(): F	ST DELETE			3.1 TITLE				Change	Addition
NAME	WILLIAMS, THOMAS		3.2	NAME	Ì				
STREET ADDRESS	AREA OUL ADOTUL AND OTHER	1			T ADDRESS				
CITY ST-78	MIRAMAR FL 33027	•			ST-ZIP				
TIFLE		DELETE		TITLE	DI EN	,	П	Change	Addition
	1		1	NAME	. )		٠١ '		
NAM!			1						
STREET ADDRESS	<sup>5</sup> [				T ADDRESS				
CITY ST - ZIF		T loc. Etc		CITY-S	ST-ZIP		<del></del>	<u> </u>	1 4 4 4 5 5
TILLE		☐ DELETE		TITLE	1		<u>, , , , , , , , , , , , , , , , , , , </u>	Change	Addition
NAME			5.2	NAME					
STREET ADDRESS	s (		5.3	STREET	ADDRESS				
City - St - ZIP			5.4	CITY - S	ST - 21P				
MLE		DELETE	61	TITLE				Change	Addition
NAME			62	NAME					
STREET ADDRESS	<u> </u>				T ADDRESS				
Pity CL 7/P				CITY - 9					

14. Edo 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 of director of the corporation or the receiver or trusted enpowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 in Effect 13 if changed, Section an attachment with unaddress.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED HAM OF BIGNING OFFICER OR DIRECTO

Plas

3-30-97 (305) 634-1845