2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000091273

1. Entity Name

STREET ADDRESS

CITY-ST-ZIP

CTTY-ST-ZIP

NAME STREET ADDRESS

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-7IP

P. D. R. ENTERPRISES, INC.



FILED Jan 12, 2006 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

8821 STILLWATERS LANDING DR RIVERVIEW, FL 33569 8821 STILLWATERS LANDING DR RIVERVIEW, FL 33569



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01072006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3383776

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

5. Name and Address of Current Registered Agent

8821 STILLWATERS LANDING DRIVE

RIVERVIEW, FL 33569

DURAZZO, FRANKLYN P 8821 STILLWATERS LANDING DRIVE RIVERVIEW, FL 33569

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	named entity submits this statement for the plions of registered agent.	ourpose of changing its re	gistere	ed office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and acces
SIGNATURE_		<u> </u>				
	Signature, Typed or printed name of registered agent and title	dappikable. (NOTE.R	equak c	d Agent signature	required when reinstaling)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	9. Election Campaign Trust Fund Contrib		~ —	\$5.00 May Be Added to Fees	U00000384064 01/13/08-80026-004 150.00
10.	OFFICERS AND DIRE	CTORS		1	,	,
TITLE NAME STREET ADDRESS CITY - ST - ZEP	P DURAZZO, FRANKLYN P 8821 STILLWATERS LANDING DRIV RIVERVIEW, FL 33569	E				
TITLE	VT DURATTO DIANEK			1		•

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter (19, Florida Statutes, I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JULIAND TYPEU OF PRINTED PAR OF SIGNING OFFICER OR DIRECTOR

1.9.6 (83)677-7542