

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

①

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
---	---	---

FILED

97 AUG 28 AM 11:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DOCUMENT # **P96000019566 (4)**  
1. Corporation Name  
**CTR ENTERPRISES INC.**


Principal Place of Business <b>7695 STANWAY PLACE BOCA RATON FL 33433</b>	Mailing Address <b>7695 STANWAY PLACE BOCA RATON FL 33433</b>
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>7601 W. SIERRA DR</b> Suite, Apt. #, etc 22 City & State 23 <b>BOCA RATON FL</b> Zip 24 <b>33433</b>		2a. Mailing Address 26 <b>7601 W. SIERRA DR</b> Suite, Apt. #, etc 27 City & State 28 <b>BOCA RATON FL</b> Zip 29 <b>33433</b> Country 30 <b>Palm Beach</b>		3. Date Incorporated or Qualified <b>03/04/1996</b>	3a. Date of Last Report
				4. FEI Number <b>✓ 65-0648846</b>	Applied For Not Applicable
				5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent <b>CRUZ, CARLOS 7695 STANWAY PLACE BOCA RATON FL 33433</b>		10. Name and Address of New Registered Agent			

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	<b>7601 W. SIERRA DR.</b>
83	
84 City	<b>BOCA RATON</b>
85 Zip Code	<b>FL 33433</b>

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	<b>President / PRES.</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CARLOS CRUZ</b>	1.2 NAME	
STREET ADDRESS	<b>7695 STANWAY PLACE</b>	1.3 STREET ADDRESS	<b>7601 W. SIERRA DR</b>
CITY-ST-ZIP	<b>BOCA RATON FL 33433</b>	1.4 CITY-ST-ZIP	<b>BOCA RATON FL 33433</b>
TITLE	<b>V. President / Sec.</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ROSE L. CRUZ</b>	2.2 NAME	
STREET ADDRESS	<b>7695 STANWAY PLACE</b>	2.3 STREET ADDRESS	<b>7601 W. SIERRA DR</b>
CITY-ST-ZIP	<b>BOCA RATON FL 33433</b>	2.4 CITY-ST-ZIP	<b>BOCA RATON FL 33433</b>
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	<b>100002283011-000</b>
NAME		4.2 NAME	<b>-03/02/97--01161--002</b>
STREET ADDRESS		4.3 STREET ADDRESS	<b>****165.00 ****165.00</b>
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 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.

CR2E034 (4/97)

Untitled

②

CTR Enterprises Inc.  
7601 Sierra Drive W.  
Boca Raton, FL 33433  
August 25, 1997

Florida Department of State  
Division of State  
P.O. Box 6327  
Tallahassee, Fl 32314


To Whom It May Concern:

We did not receive a copy of this report until the second notice was due, per my conversation with your office I was told to write a letter to this affect.

An address change was submitted to the post office in June, 1996, but your report was not forwarded. This was our first year and I was not aware of this report.

Thank you in advance.

Sincerely yours,



Carlos Cruz  
President

CC/rls