


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

FILED
May 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000044876 (6)**

1. Corporation Name
D.C.R. ENTERPRISES, INC.

Principal Place of Business
**4844 NW 24TH CT #226
LAUDERDALE LAKES FL 33313**

Mailing Address
**4844 NW 24TH CT #226
LAUDERDALE LAKES FL 33313**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3331 NW 15 Place Suite, Apt. #, etc. 22 City & State 23 Fort Lauderdale Zip 24 33311-4259 Country 25 U.S.A		2a. Mailing Address 26 3331 NW 15 Place Suite, Apt. #, etc. 27 City & State 28 Fort Lauderdale Zip 29 33311-4259 Country 30 U.S.A		3. Date Incorporated or Qualified 05/28/1996	
4. FEI Number 65-0668855		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		7. \$5.00 May Be Added to Fees		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent HOWITT, STUART 4844 NW 24TH CT #226 LAUDERDALE LAKES FL 33313				10. Name and Address of New Registered Agent 81 Name Samir A.B. ABUB 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P
NAME	ROWLAND, HARRY	1.2 NAME	Harry Rowland
STREET ADDRESS	4844 NW 24TH CT #226	1.3 STREET ADDRESS	3331 NW 15 Place
CITY-ST-ZIP	LAUDERDALE LAKES FL 33313	1.4 CITY-ST-ZIP	Fort Lauderdale FL 33311-4259
TITLE	D	2.1 TITLE	D
NAME	ROWLAND, MARY	2.2 NAME	Mary Rowland
STREET ADDRESS	4844 NW 24TH CT #226	2.3 STREET ADDRESS	3331 NW 15 Place
CITY-ST-ZIP	LAUDERDALE LAKES FL 33313	2.4 CITY-ST-ZIP	Fort Lauderdale FL 33311-4259
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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)(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.

SIGNATURE:

[Signature]

April 26, 1998

CR2E034 (10/97)