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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000058880 (1)

DORR ENTERPRISES INC.

Principal Place of Business

CITY-ST-ZIP

STREET ADDRESS

STREET ADORESS.

OffY-\$1-70

CITY - ST - ZIP

THILE

NAME

TITLE

NAME

1401 VILLAGE BLVD. 1401 VILLAGE BLVD. #2214 #2214 WEST PALM BEACH FL 33409 WEST PALM BEACH FL 33409-2794 3. Date Incorporated or Qualified 3a. Date of Last Report 07/12/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0686610 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 28 Added to Fees 23 Country Country This corporation has liability for intangible tax under s. 199.032, Yes No 29 30 Fiorida Statutes 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DORR, CHRISTOPHER 1401 VILLAGE BLVD. Street Address (P.O. Box Number is Not Acceptable) #2214 WEST PALM BEACH FL 33409 City Zip Code 85 we-named corporation submits this statement for the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered les. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the at office or registered agent, or both, in the State of Florida. Such change was authorized agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida State SIGNATURE Signature, typed or printed rivere of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) 12. 13. D. P. T. TS HER DORK DELETE 1.1 TITLE Change **Addition** TITLE NAME 1.2 NAME CR2E034 MOI VILLAGE BLVD: N 2214 WEST PALK BEACH, FL 33 STREET ADORESS 1.3 STREET ADDRESS CITY-ST-ZIP 1.4 CITY-ST-7/P Change Addition THILE DELETE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADORESS CITY-S1-ZIP 2.4 CITY-ST-ZIP DELETE Addition Change 3.1 TITLE TITLE 32 NAME STREET ADDRESS 3.3 STREET ADDRESS 34. Dity-St-ZiP CITY-ST ZP DELETE Change ☐ Addition 4.1 TITLE Title 4, 2 NAME NAME STREET ADORESS 4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5 3 STEET ADDRESS

-ST-Z#

ET ADDRESS

- ST - 71F

5.1 TITLE

5.2 NA 1E

611

621

635

640

DELETE

DELETE

14. I do hereby certify that the information supplied with this filing does not qualify for the information indicated on this annual report or supplemental annual report is true and I am an officer or director of the corporation or the receiver or trustee empowered to appears in Block 12 or Block 13 i changed, or on an attachment with an address.

kemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the curate and that my signature shall have the same legal effect as if made under oath; that icute this report as required by Chapter 607, Florida Statutes; and that my name

4/30/97 56d-616-9718

Change

Change

Addition

Addition

FILED

May 12 1997 8:00am

Secretary of State