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Jun 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
David B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000082366 (1)

1. Corporation Name
DMI ENTERPRISES, INC.



Principal Place of Business
2330 MARSH HARBOR AVE
MERRITT ISLAND FL 32952

Mailing Address
2330 MARSH HARBOR AVE
MERRITT ISLAND FL 32952-4076

3. Date Incorporated or Qualified
10/03/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FCI Number

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CHRISTENSEN, EDWARD
635 DELANNOY AVENUE
COCOA FL 32922

81 Name

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 D
NAME WITTEKIND, GARY
STREET ADDRESS 2330 MARSH HARBOR AVE
CITY-ST-ZIP MERRITT ISLAND FL 32952

1.1 TITLE PRESIDENT
1.2 NAME WITTEKIND, GARY
1.3 STREET ADDRESS 2330 MARSH HARBOR AVE
1.4 CITY-ST-ZIP MERRITT ISLAND, FL 32952

TITLE D
NAME DISMORE, JOHN
STREET ADDRESS 3880 SAVANNAHS TR
CITY-ST-ZIP MERRITT ISLAND FL 32953

2.1 TITLE VICE-PRESIDENT
2.2 NAME DISMORE, JOHN
2.3 STREET ADDRESS 3880 SAVANNAHS TR
2.4 CITY-ST-ZIP MERRITT ISLAND, FL 32953

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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 a 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

6/28/97

187-454-4291

CR2E034 (9/96)