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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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Apr 08 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000089552 (9)

DMR CONSULTANTS, INC.

STREET ADORESS

SIGNATURE:

CITY - ST- ZIP

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Suite Aprile etc. Suite Aprile etc. Suite						10/31/1996	3a. Date of Las	st Report
Suite April # cito Suite April #, etc. S. Certificate of Status Desired S. Edection Campaign Financing S. S. Ou M. City & State S. Election Campaign Financing S. S. Ou M. Trust Fund Contribution Added to I. City & State S. Election Campaign Financing S. S. Ou M. Trust Fund Contribution Added to I. City & State S. Election Campaign Financing S. S. Ou M. Trust Fund Contribution Added to I. City & State S. City & Status S. City & S	2. Principal l	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
City & State Country Country City & State Country						59-3410520		Not Applicable
Zip Zip Country Zip Country Added to Added to Zip Country St. This corporation has liability for intengible tay-order s. 11 Florida Statutes Yes Zip Street Address of New Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 10. Name and Address of New Registered Age	22		27			5. Certificate of Status Desired	T	5 Additional Required
24 9. S. Name and Address of Current Registered Agent NEWMAN, FRANK T Stot N POEL RD PLANT CITY FL 33565 82 Street Address (P.O. Box Number is Not Acceptable) FL	´	ale	⊢ ′				Pro	00 May Be led to Fees
NewMan, FRANK T STOTI N POEL RD PLANT CITY FL 33565 Street Address (P.O. Box Number is Not Acceptable)		Country	Zip	Count	ry	8. This corporation has liability for it	ntangible tax and	er s. 199.032,
NEWMAN, FRANK T 5101 N POEL RD PLANT CITY FL 33565 83 84 City FL 85 Zip Co 11. Pursuant to the provisions of Sections 607,0002 and 607,1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its rothic 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 reagent, and lamilar with, and accept the obligations of, Section 607,0002 florida Statules, the above-named corporation's board of directors. I hereby accept the appointment as reagent, and accept the obligations of, Section 607,0005, Florida Statules, the above-named corporation's board of directors. I hereby accept the appointment as reagent, and accept the obligations of, Section 607,0005, Florida Statules, the above-named corporation's board of directors. I hereby accept the appointment as reagent, and accept the obligations of, Section 607,0005, Florida Statules, the above-named corporation's board of directors. I hereby accept the appointment as reagent, and accept the obligations of, Section 607,0005, Florida Statules, the above-named corporation's board of directors. I hereby accept the appointment as reagent agent and accept the obligations of Section 607,0005, Florida Statules, the above-named corporation's board of directors. I hereby accept the appointment as reagent agent and accept the obligations of Section 607,0005, Florida Statules, the above-named corporation's board of directors. I hereby accept the appointment as reagent agent a	24			30				
Street Address (P.O. Box Number is Not Acceptable)			Registered Agent		11 Name	10. Name and Address of New Re	gistered Agent	
PLANT CITY FL 33565 B3 B4 City FL B5 Zip Co 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 reduced agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature bytent or present currend tragonered agent and title a largification OF JICERS AND DIFFECTORS 12. OF JICERS AND DIFFECTORS 13. ADDITIONS/CHANGES TO DEFICERS AND DIFFECTORS THE PRESIDENT DIRECTOR SIRRET ADDRESS CITY ST. ZP DUNNBUN, FL 34698 14.CITY ST. ZP DUNNBUN, FL 34698 14.CITY ST. ZP DUNNBUN, FL 34698 14.CITY ST. ZP CHANGES OF DEFINE 22. NAME 12. ADDITIONS/CHANGES TO DEFICERS AND DIFFECTORS 13. ADDITIONS/CHANGES TO DEFICERS AND DIFFECTORS 13. ADDITIONS/CHANGES TO DEFICERS AND DIFFECTORS 13. TREET ADDRESS 13. TREET ADDRESS 13. TREET ADDRESS 14.CITY ST. ZP CHANGES OF DEFINE DUNNBUN, FL 34698 14.CITY ST. ZP CHANGES OF DEFINE CHANGES OF DEFINE DELETE 13. ADDITIONS/CHANGES TO DEFICERS AND DIFFECTORS 13. TREET ADDRESS 13. TREET ADDRESS 13. TREET ADDRESS 13. TREET ADDRESS 14.CITY ST. ZP CHANGES OF DEFINE CHANGES 14.CITY ST. ZP CHANGES OF DEFINE CHANGES 14.CITY ST. ZP CHANGES OF DEFINE 15. TREET ADDRESS 14.CITY ST. ZP CHANGES OF DEFINE 15. TREET ADDRESS 16.CITY ST. ZP CHANGES OF DEFINE 16.CITY ST. ZP CHANGES OF DEFINE 17. ST. ZP CHANGES OF DEFINE 17. ST. ZP CHANGES OF DEFINE 18. CITY ST. ZP CHANGES O				°	Name			
B3				82 Street A		dress (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607.05.02 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 reagent, I am familiar with, and accept the obligations of, Section 607.05.05, Florida Statutes. SIGNATURE Style alone by the previous came of registered agent and title of applicable. OF ICERS AND DIRECTORS 12. OF ICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS. 11. TITLE SALVATORS V. MAIOLA 12. NAME SIREH ADDRESS CITY ST. 7P DUNADIN, FL. 346.99 14. City 15. TITLE SALVATORS V. MAIOLA 12. NAME 13. SIREH ADDRESS CITY ST. 7P DUNADIN, FL. 346.99 14. City 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS. 15. SIREH ADDRESS CITY ST. 7P DUNADIN, FL. 346.99 14. City 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS. 15. SIREH ADDRESS 16. City ST. 2P DUNADIN, FL. 346.99 16. City ST. 2P DUNADIN, FL. 346.99 17. Yell S. Awmille C. Change Change Change Change Change Change NAME 4. 2NAME DELETE 5. TITLE Change Ch	PU	ANT CITY FL 33565		ļ.	3			
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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 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 reagent. I am familiar with, and accept the obligations of, Section 507.0505, Florida Statutes. SIGNATURE Suputors bysed or pration came of registered agent and title of prations of, Section 507.0505, Florida Statutes. 12. OF FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TITLE PRESIDEM DIRECTOR DELETE 11 TITLE Change 12 NAME SALVATORS V. MAIOUN 12 NAME 300 WOO DETTE DR. #603 13 STRET ADRESS CITY. SI. 7P DUMBOLN, FL. 346.9% 14 CITY. SI. 2P TITLE VICE PRESIDEM DIRECTOR DELETE 21 TITLE Change NAME JEROME C. DEVINE 22 NAME SIRELE ADDRESS JURO SAWMILL RD 23 STREET ADRESS CITY. SI. 7P DUMMING TOWN PA 9335 24 CITY. SI. 2P TITLE SECRETARY TRESSITION FL. 333320 DELETE 31 TITLE Change WILLIAM A. PRID 33 STREET ADDRESS CITY. SI. 7P DANTA-TOWN FL. 333320 DELETE 41 TITLE Change THE DELETE 41 TITLE Change NAME 42 NAME NAME A3 STREET ADDRESS CITY. SI. 7P DELETE 51 TITLE Change NAME DELETE S1 TITLE				8	4 City		85 Z	žip Code
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NAME 62 NAME			£ Death				L. Crian	B. Francisco

6.3 STREET ADDRESS 6.4 CITY-SE-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.