2004 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 07, 2004 08:00 AM Secretary of State DOCUMENT # P96000100072 DSR INVESTMENTS, INC. Principal Place of Business Mailing Address ONE SE THIRD AVE #3050 ONE SE THIRD AVE #3050 MIAMI, FL 33131 US MIAMI, FL 33131 US 01052004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0713020 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROSENBERG, DONALD S DO NOT WRITE ONE SE THIRD AVE #3050 MIAMI, FL 33131 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and life if applicable (NOTE: Registered Agent signature required whon reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 **\$5.00** May 8e Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE PSTD ROSENBERG, DONALD S NAME STREET ADDRESS ONE SE THIRD AVE #3050 CHTY - ST - ZIP MIAMI, FL 33131 UCOCOOCO0219 31/07/04-80013-006 158.75 TITLE ROSENBERG, LORI E MAME ONE SOUTHEAST THIRD AVE. ST 3050 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33131 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP 3173.5 IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP 1333 NAME

12. Thereby 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 report of supplemental report is true and accurate and that my signature shall have the same legal effect as it made under oath, that I am an officer or director of the corporation or the deceiver or trustee empowered to execute this report as required by Grapher 207, Plorida Statutes; and that my name appears in Block 10 or Block 11 if

STREET ADDRESS City-St-ZiP TITLE NAME STREET ADDRESS CHY-ST-ZIP

FILED