

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

FILED
May 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P97000062263 (3)
 1. Corporation Name
D & Y INTERNATIONAL ENTERPRISES, INC.



Principal Place of Business: 1103 NW 180 AVENUE, PEMBROKE PINES FL 33029
 Mailing Address: 1103 NW 180 AVENUE, PEMBROKE PINES FL 33029

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 21 200 S.W. 85th Ave #305, Pembroke Pines FL 33025
 2a. Mailing Address: 26 200 S.W. 85th Ave #305, Pembroke Pines FL 33025
 3. Date Incorporated or Qualified: 07/17/1997
 4. FEI Number: 65-0768578
 5. Certificate of Status Desired: \$8.75 Additional Fee Required
 6. Election Campaign Financing: \$5.00 May Be Added to Fees
 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent: BELTRAN, WILLIAM, 1103 NW 180 AVENUE, PEMBROKE PINES FL 33029
 10. Name and Address of New Registered Agent: 81 Name LUTH-BELTRAN CLAUDIA, 82 Street Address 200 S.W. 85 AVE # 305, 84 City Pembroke Pines, FL 85 Zip Code 33025

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: *William Beltran* William Beltran (President) 4/27/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	<input type="checkbox"/> DELETE	1.1 TITLE: PD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: BELTRAN, WILLIAM		1.2 NAME: BELTRAN, WILLIAM	
STREET ADDRESS: 1103 NW 180 AVENUE		1.3 STREET ADDRESS: 200 S.W. 85 AVE # 305	
CITY-ST-ZIP: PEMBROKE PINES FL 33029		1.4 CITY-ST-ZIP: Pembroke Pines FL 33029	
TITLE: SD	<input checked="" type="checkbox"/> DELETE	2.1 TITLE: S.D.	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: OLIVA-YOUNG, ANN E		2.2 NAME: BELTRAN-LUTH, CLAUDIA	
STREET ADDRESS: 1103 NW 180 AVENUE		2.3 STREET ADDRESS: 200 S.W. 85 AVE # 305	
CITY-ST-ZIP: PEMBROKE PINES FL 33029		2.4 CITY-ST-ZIP: Pembroke Pines FL 33025	
TITLE:	<input type="checkbox"/> DELETE	3.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		3.2 NAME:	
STREET ADDRESS:		3.3 STREET ADDRESS:	
CITY-ST-ZIP:		3.4 CITY-ST-ZIP:	
TITLE:	<input type="checkbox"/> DELETE	4.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		4.2 NAME:	
STREET ADDRESS:		4.3 STREET ADDRESS:	
CITY-ST-ZIP:		4.4 CITY-ST-ZIP:	
TITLE:	<input type="checkbox"/> DELETE	5.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		5.2 NAME:	
STREET ADDRESS:		5.3 STREET ADDRESS:	
CITY-ST-ZIP:		5.4 CITY-ST-ZIP:	
TITLE:	<input type="checkbox"/> DELETE	6.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: *William Beltran* William Beltran 4/27/98 (954) 963-8084

CFR2E034 (10/97)