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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000092416 (1)

DTM ENTERPRISES, INC.

## FILED Feb 11 1998 8:00am Secretary of State



1954)941-6500

105 00

Principal Place of Business Mailing Address						
1224 N.E. 4TH AVEN		1224 N.E. 4TH AVENU	¢			
FT. LAUDERDALE FL 33304		FT. LAUDERDALE FL 33304				
					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 10/27/1997	
2. Principal Place of	Business	2a. Mailing Address			4. FEI Number Applied For	
21		26			Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional	
22		27			Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Coun	lry	8. This corporation owes or has paid the current year Intangible	
24	25	29	30		Personal Property Tax due June 30. Yes X No	
	lame and Address of Curr	ent Registered Agent			10. Name and Address of New Registered Agent	
O'SHAUG	HNESSY, THOMAS P			1 Name	•	
	W. 11TH COURT		Ē	2 Street	t Address (P.O. Box Number is Not Acceptable)	
DAVIE FL		15	Sireet	TAGGIOSS (F.O. DOX INTITUDE IS HOLINGUIS)		
22.02			8	13		
				4 City	■ 85 Zip Code	
				City	FL 85 Zip Code	
11. Pursuant to the p	rovisions of Sections 607.05	02 and 607 1508, Florida Stat	lules, the abo	ve-named	d corporation submits this statement for the purpose of changing its registered	
		te of Florida. Such change wa gations of, Section 607.0505,			rporation's board of directors. I hereby accept the appointment as registered	
•	in this, and docops the obs	ganono on pootion our soup,	i ionaa olala			
SIGNATURE Signature	. Typied or printed name of registered a	gent and title if applicable (N	OTI Registered /	gent signaturi	re required when reinstating) DATE.	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE		DELETE	1.1 TITLE		PRESIDENT (P) Change Addition THOMAS P. D'SHAUGHNGSSY III 12470 S.W. II COURT	
NAME			1.2 NAM	E	THOMAS P. D'SHAUGHNESSY III	
STREET ADDRESS			1.3 STRE	ET ADDRESS	12470 S.W. 11 COURT	
CITY-ST-ZIP			1,4 CITY	-ST-ZIP	DAVIE, FLA. 33325	
TITLE		DELETE 2.1 TITL			SECRETARY (5) Change Addition	
NAME			2.2 NAM	E	CHARLA M. O'SHAUGHNESSY	
STREET ADDRESS			2.3 STRE	ET ADDRESS	12470 S.W. 11 COURT	
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		DAVIE, FLA. 33325	
TITLE		DELETE	3.1 TITLE		Change Addition	
NAME	321		3.2 NAM	E		
STREET ADDRESS			3.3 STRE	ET ADDRESS		
CITY-ST-ZIP			3.4. CITY	-ST-ZIP		
TITLE	DELETE 4.1 TITLE			Change Addition		
NAME			4. 2 NAM	IE		
STREET ADDRESS			4.3 STRE	ET ADDRESS		
CITY-ST-ZIP			4.4 CITY	- ST - ZIP		
TITLE	☐ DELETE		5.1 TITLE		Change Addition	
NAME			5.2 NAM			
STREET ADDRESS			5.3 STRE	ET ADDRESS		
CITY-ST-ZIP			5.4 CITY	- S1 - ZIP		
TITLE		DELETE	61 TITLE		☐ Change ☐ Addition	
NAME			6.2 NAM			
STREET ADDRESS			6.3 STRE	E1 ADDRESS		
CITY-ST-ZIP			6.4 CITY	- \$1 - ZIP		
14. I hereby certify th	at the information supplied	with this filing does not qualify	for the exem	ption state	ted in Section 119.07(3)(i), Florida Statutes. I further certify that the information	
officer or director	annual report or supplement of the corporation or the	iai aviiluai report is true and ac solver or trusteo empowered ti	o <b>ox</b> ecute this	nat my sig s report as	gnature shall have the same legal effect as if made under eath; that I am an s required by Chapter 607, Florida Statutes; and that my name appears in	
Block 12 or Block	131 changed, or op an alt	achment with an address.			>	