FILE NOW: FILING FEE AFTER MAY 1ST IS \$550,00

PAGE WIZ **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Katherine Harris ANNUAL REPORT Secretary of State FILED 2003 **DIVISION OF CORPORATIONS** P9800009 03 MAY 13 AM H: 14 DSSS ENTERPRISES SECRETARY OF STATE JALLAHASSEE, FLORIDA 500020256045 05/29/03--01068--018 ***150.00 Principal Place of Business Mailing Address 973 NW. ETHST. Homestead FIA 33030 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For SAME SAME 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certifcate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes the current year Intangible 24 25 30 Personal Property Tax. □No 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TAVIDSON, TONALL.
973 NW. 9Th ST.
HomesTead PLORIDA
33030 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City Zip Code 85 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change TITLE 1.1 TITLE 1.2 NAME NAME 500020256045 05/29/03--01063--019 **150.00 STREET ADDRESS 1.3 STREET ADDRESS 33030 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change 2.1 TITLE Addition TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 3.1 TITLE ☐ Change ☐ Addition 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE Addition Change TITLE 6.2 NAME

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 Block 12 or Block 13 if changed, or or an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

psyour

JAMES E. TICE ASSOCIATES

Accountants 16220 S.W. 280th Street Homestead, Florida 33031

> Telephone: (305) 247-3700 Fax: Call First Cellular Phone: 305-322-5715

April 28, 2003

Florida Department of State Annual Report Filings Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314

> Re: DSSS Enterprises, Inc. P98000093818 Filed 11/03/1998

Gentlemen,

Please be advised that Mr. Donald R. Davidson moved last year and did not receive the required form for filing the annual report on time. It was not until we questioned it that we realized that the return was not properly filed. Please accept this filing for the years 2002 and the year 2003. Enclosed herewith please find a check for \$300.00 and the forms properly executed for the two years. Thank you for your consideration in this matter.

Sincerely,

James E. Tice Accountant

James & Tice