FILED **2005 FOR PROFIT CORPORATION** Jul 18, 2005 08:00 AM Secretary of State **ANNUAL REPORT DOCUMENT # P99000032316** 1. Entity Name D.B.C.R., INC. Mailing Address Principal Place of Business 8354 S.W. 40TH STREET 8354 S.W. 40TH STREET MIAMI, FL 33155 MIAMI, FL 33155 01292005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0940325 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent BLUTSTEIN, GEORGE J DO NOT WRITE #501-20801 BISCAYNE BLVD. AVENTURA, FL 33180 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 famillar with, and accept the obligations of registered agent. (NOTE, Registered Agent signature required when reinstaling) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE AVERY, LAURIE NAME U00000373436 STREET ADDRESS 8050 N.W. 96TH TERRACE 07/18/05-80015-007 558.75 CITY-ST-ZIP TAMARAC, FL 33321 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 or supplemental 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 receivement trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

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3:1-523-1885