2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 16, 2007 08:00 AM Secretary of State

	TITOAL ILLI DICI		~	200
DOCUMENT # P99 1. Entity Name DMH ENTERPRISES OF			Sec	cretary of Sta
Principal Place of Business C/O FRAZIER & FRAZIER, ATT. AT L 1515 RIVERSIDE AVE., STE. A JACKSONVILLE, FL 32204	Mailing Address AW, P.A C/O FRAZIER & FRAZIE 1515 RIVERSIDE AVE. JACKSONVILLE, FL 32	, STE. A		
DO NOT \	WRITE IN THIS S	PACE	01112007 No Chg-P 4. FEI Number 59-2894005 5. Certificate of Status Desired	CR2E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required
FRAZIER, W. ROBINSON C/O FRAZIER & FRAZIER, A 1515 RIVERSIDE AVE., STE JACKSONVILLE, FL 32204	A his statement for the purpose of changing its	registered office or registe	DO NOT WE IN THIS SPA	ACE
SIGNATURE	\$150.00 9. Election Campa		when reinstating) .00 May Be led to Fees	DATE
TITLE DP NAME HICKS, DAVID M STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, F TITLE DVP NAME FRAZIER, W. ROB STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, F TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	IL 32210 INSON AVE STE A		01/16/07-80 DO NOT WE	
NAME STREET ADDRESS CITY-ST-ZIP				

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. 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 receiver or puspes 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 withy in address, with all other like empowered

SIGNATURE:

TITLE NAME STREET ADDRESS

W. /// 1-12-07

SIGNATURE AND THE OBJECT OF FOR A PROPERTY OF CE President

904-353-5616

Daytme Phone #