


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

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Apr 01 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
<b>DOCUMENT # S21532 (4)</b>		
1. Corporation Name <b>DORALCO NO. 4, INC.</b>		

Principal Place of Business <b>4801 ELBERT PLACE KISSIMMEE FL 34758 US</b>	Mailing Address <b>4800 ELBERT PLACE KISSIMMEE FL 34758 US</b>
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2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24	25
29	30

9. Name and Address of Current Registered Agent <b>SMITH, NORMAN J. ESQ. 1201 W. EMMETT STREET KISSIMMEE FL 34741</b>	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

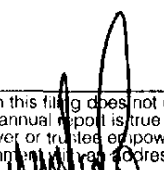
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. 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)

12. OFFICERS AND DIRECTORS	
TITLE	NAME
STREET ADDRESS	CITY - ST - ZIP
DPT ABULAFIA, VICTOR 4800 ELBERT PLACE KISSIMMEE FL	
DV ABULAFIA, ELIAHU 4800 ELBERT PLACE KISSIMMEE FL	
DVS YOSCHPE, JAIME 4800 ELBERT PLACE KISSIMMEE FL	
DV ROSENTHAL, AMOS 4800 ELBERT PLACE KISSIMMEE FL	
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3. Date Incorporated or Qualified <b>12/27/1990</b>	
4. FEI Number <b>59-3057280</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
10. Name and Address of New Registered Agent	

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 to this report.

SIGNATURE:  Victor Abulafia 3/16/98 407/846-0550

CR2E034 (10/97)