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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # V42270

1. Corporation Name

(1)

DNR INTERNATIONAL, INC.

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FILED

May 02 1997 8:00am

Secretary of State

Principal Place of Business	Mailing Address			
6800 S.W. 40TH STREET SUITE 174 MIAMI FL 33155	6800 S.W. 40TH STREET SUITE 174 MIAMI FL 33155-3755			
			3. Date Incorporated or Qualified 06/08/1992	3a. Date of Last Report 05/01/1996
Principal Place of Business The Principal Place of Business The Principal Place of Business	28. Mailing Address 26 /020 MERIPIAN	I AVE.	4. FEI Number 65-0340567	Applied For Not Applicable
22	Suite, Apt. #, etc. 27 APT # 310		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State 23	City & State 28 MIAMI BEACH	,FL	Election Campaign Financing. Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 24 25	29 33139 30	untry	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes No
Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		
BOYCE, REBBECA 14929 SW 141 PL. 12TH FLOOR MIAMI FL 33186		81 Name 82 Street Address (P.O. Box Number is Not Acceptable)		
		83 APT. 310		
			AMI BEACH	FL 85 33/39
 Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligat 	ot Florida. Such change was authorize	ed by the corporation	pration submits this statement for the pi on's board of directors. I hereby accep	urpose of changing its registered the appointment as registered
SIGNATURE Signaturi , typust or prioted name of registered agent	and title if applicable. (NOTE: Register	ed Agent signature required	o when reinslating)	DATE

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THUE DS ☐ DELETE 1.1 TITLE Change Addition NAME BOYCE, REBECCA 1.2 NAME 1020 MERIDIAN AVE., APT 310 14929 SW 141 PLACE STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY SI-ZIP 1.4 CITY-ST-ZIP THE DELETE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CHY-ST-7+ 2 4 CITY-ST-ZIP hitt DELETE 31 TITLE Change Addition NAMi 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CHIY-ST-ZiF 3.4. CITY-ST-ZIP DELETE TILE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - Ziff 4.4 CITY-ST-ZIP DELETE Change THEF 5.1 TITLE Addition 5.2 NAME NAME STREET ADORESS 5.3 STREET ADDRESS 001Y-S1-ZIF 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. I do 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 arr. 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 with an address.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME O SIGNING OFFICER OR DIRECTOR

Apr. 26,1997 672-6866

Daytime Prione #