2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # V49463

1. Entity Name

DABCO ENTERPRISES, INC.



FILED Jan 21, 2005 8:00 am Secretary of State

01-21-2005 90051 025 ***150.00

Principal Place of Business

3527 NE 168 STREET

2021 NE 100 31KE

NORTH MIAMI BEACH, FL 33160 US

Mailing Address

3527 NE 168 STREET

404

DO NOT WRITE IN THIS SPACE

NORTH MIAMI BEACH, FL 33160 US



01182005

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0344887

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COOPER, DAVID B. 3527 NE 168 STREET

404

NORTH MIAMI BEACH, FL 33160

DO NOT WRITE IN THIS SPACE

			}				
the obligat	named entity submits this statement for the prions of registered agent.	urpose of changing its registere	ed office or regis	stered agent, or bot	h, in the State o	f Florida. I am familiar with, and	accept
SIGNATURE.	Signature, typed or printed name of registered agent and title (applicable. , (NOTE: Registere					_
	Signature, typeo or printed name or registered agent and tipe to	applicable. , (NOTE: Registere	a Agent signature requ	ired when reinstating)	ia:	DATE	
FILE NOWIII FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		Election Campaign Finan Trust Fund Contribution.		5.00 May Be dded to Fees		en var en en en en els anteriors de la fille de la La fille de la	ชเอชิ้ม 11 (1)
10.	OFFICERS AND DIREC	TORS	I	•		•	
NAME STREET ADDRESS CATY-ST-ZIP	D COOPER, DAVID B. 3527 NE 168 STREET STE 404 MIAMI, FL 33160	·				• • •	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			, a				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		*	2 <u> </u>	DO	NOT-	WRITE	
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TITLE	* * * * * · · · · · · · · · · · · · · ·	·-	To the second se	, s			

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 receiver or 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

STREET ADDRESS - ---

SIGNATURE AND TYPED OF PRINTED MAKE OF SIGNING OFFICER OR DIRECTOR

1)18/05

305-949- 5897

Data

777 30