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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # V73

1. Corporation Name

V73

V73479

(0)

D & R PROFESSIONAL SERVICES, INC.

FILED Jan 16 1998 8:00am Secretary of State



Principal Place of Business Mailling Address					-  -	! <b>8</b> []]	BIBII BYBIT (BE	
5000 NW 95TH DR 5000 NW 95TH DR CORAL SPRINGS FL 33076-2630 CORAL SPRINGS FL 330			076_2620			İ		
US		US STREET				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
						10/21/1992		
2. Principal Place of Business 2a. Mailing A			ddress			4. FEI Number	I IA	pplied For
21		26			65-0365999	<del></del>	lot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					Additional	
22		27			5. Certificate of Status Desired	Fee F	lequired	
City & State		City & State			6. Election Campaign Financing	\$5.00	May Be	
		28	28			Trust Fund Contribution		to Fees
Zip	Country	Zip	Country			8. This corporation owes or has paid the		
24	25	29	30			Personal Property Tax due June 30,		Z No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent								
[ N	AIS, RICHARD G.			81	Name			-
5000 NW 95TH DR			ŀ	82 Street Address (P.O. Box Number is Not Acceptable)				
)	ORAL SPRINGS FL 33076		62 Street Ad			ss (P.O. Box Number is Not Acceptable)		1
			83			. Window Citize		
			-	84	City		85 Zip	Code
11 Purcuant	to the provincions of Sections 607.050	2 and 907 1509 Fleshin Statute				F	<u> </u>	
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								
12.	OFFICERS ANI			Agent	signature required			
TITLE	D OFFICERS AND	D DINECTORS  DELETE		13.		ADDITIONS/CHANGES TO OFFICERS A		
NAME	SCHAPIRO, DAVID	occit					Change	Addition
STREET ADDRESS	17712 PINE NEEDLE TERR.			1.2 NAME				
			1.3 STREET ADDRESS					ļi
CITY-ST-ZIP	BOCA RATON FL 33487		_	1.4 CITY-ST-ZIP			<del> </del>	
TITLE	<del>-</del>			2.1 TITLE			Change	Addition
NAME	MIS, RICHARD G		2.2 NAME					1
STREET ADDRESS	5000 NW 95TH DR		2.3 STREET ADDRESS		DDRESS			1
CITY - ST - ZIP	CORAL SPRINGS FL 33076-2630		_	2. 4 CITY-ST-ZIP				
TITLE	☐ DELETE		3.1 TITLE				L Change	☐ Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STR	EET AE	ODRESS			
CITY-ST-ZIP			3.4. CIT	Y-ST-	ZIP			
TITLE		☐ DELETE	4.1 TITL	E			☐ Change	☐ Addition
NAME			4. 2 NA	ME	1			1
STREET AODRESS			4.3 STR	EET AD	DORESS			
CITY-ST-ZIP			4.4 CITY	/-ST-2	ZIP			-
TITLE			5.1 TITL				Change	Addition
NAME			5,2 NAM	Œ				
STREET ADDRESS			5.3 STR		DRESS			
CITY-ST-ZIP			5.4 C/TY					
TITLE		DELETE	6.1 TITL				Change	Addition
NAME		_	6.2 NAM					
STREET AODRESS			6.3 STR		DBESS			
CITY-ST-ZIP			6.4 CITY					-
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1. 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 go an atjachment with an address.

SIGNATURE:

1/03/98 954/3

954/346-6665