

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 13, 2006 8:00 am
Secretary of State

09-13-2006 90002 031 ***150.00

DOCUMENT # P00000013132

1. Entity Name
DEERFIELD BEACH CARD & GIFT EMPORIUM INC.



Principal Place of Business 100 S. MILITARY TR. #11 DEERFIELD BEACH, FL 33442	Mailing Address 100 S. MILITARY TR. #11 DEERFIELD BEACH, FL 33442
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2. Principal Place of Business		3. Mailing Address		09072006	Chg-P	CR2E034 (11/05)
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 65-0977308		Applied For Not Applicable
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
Zip	Country	Zip	Country			

6. Name and Address of Current Registered Agent KIVET, BARBARA 100 S MILITARY TRAIL DEERFIELD BEACH, FL 33442	7. Name and Address of New Registered Agent Name LYNN ATLAS Street Address (P.O. Box Number is Not Acceptable) 7724 STIRLING BRIDGE BLVD N City DELRAY BEACH FL Zip Code 33446
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I, the above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *[Signature]* DATE: **9-7-06**

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 Due by September 15, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '11			
OFFICER	PD KIVET, BARBARA 100 S MILITARY TRAIL DEERFIELD BEACH, FL 33442	<input checked="" type="checkbox"/> Delete		TITLE	PD LYNN ATLAS 7724 STIRLING BRIDGE BLVD N DELRAY BEACH FL 33446	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
STREET ADDRESS		<input type="checkbox"/> Delete		NAME		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
CITY-ST-ZIP		<input type="checkbox"/> Delete		STREET ADDRESS		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		<input type="checkbox"/> Delete		CITY-ST-ZIP		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		<input type="checkbox"/> Delete				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		<input type="checkbox"/> Delete				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		<input type="checkbox"/> Delete				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		<input type="checkbox"/> Delete				<input type="checkbox"/> Change	<input type="checkbox"/> Addition

I hereby certify that the information supplied with this filing 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 this 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: *[Signature]* DATE: **9-7-06**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT

60038865

#P000001332

Florida Department of State
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

RE: FEI #: 65-0977308

To Whom it May Concern:

Enclosed you will find the 2006 for Profit Corporation Annual Report form signed by Lynn Atlas, requesting the Registered Agent be listed as Lynn Atlas. The name Barbara Kivet was listed for 2005, erroneously and should be deleted or removed.

Kindly call or e-mail Lynn Atlas at 1-561-314-9822 as soon as the Registered Agent name is changed, or lindzy25@aol.com.

Your attention to the above request is greatly appreciated.

Thanking you in advance, I remain

Sincerely yours,


Lynn Atlas