

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000065631

FILED
Feb 20, 2004
Secretary of State

Entity Name: D LEVIN INVESTMENTS, INC

Current Principal Place of Business:

5112 POINTE EMERALD LN.
BOCA RATON, FL 33486

New Principal Place of Business:

Current Mailing Address:

5112 POINTE EMERALD LN.
BOCA RATON, FL 33486

New Mailing Address:

FEI Number: 16-1627495

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVIN, DAMARA
902 CLINT MOORE RD
SUITE 132
BOCA RATON, FL 33487

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: LEVIN, DAMARIS
Address: 5112 POINTE EMERALD LN.
City-St-Zip: BOCA RATON, FL 33486

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: LEVIN COHN, DAMARIS
Address: 5112 POINTE EMERALD LN.
City-St-Zip: BOCA RATON, FL 33486

Title: VP () Change (X) Addition
Name: LEVIN, BENISA
Address: 5112 POINTE EMERALD LANE
City-St-Zip: BOCA RATON, FL 33486

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAMARIS LEVIN COHN

CEO

02/20/2004

Electronic Signature of Signing Officer or Director

_____ Date