

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90407 022 ***150.00

DOCUMENT # P03000099018 1. Entity Name JACK DEITEMEYER ENTERPRISES, INC.					
Principal Place of Business 8085 OVERSEAS HWY. MARATHON, FL 33050			Mailing Address 8085 OVERSEAS HWY. MARATHON, FL 33050		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip		City & State Zip		4. FEI Number 14-1894842	
Country		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DEITEMEYER, JACK D 8085 OVERSEAS HWY. MARATHON, FL 33050	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ZINK, HARRY 8085 OVERSEAS HWY. MARATHON, FL 33050	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TERRY, CLARK 8085 OVERSEAS HWY. MARATHON, FL 33050	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ALBERT, PAUL 8085 OVERSEAS HWY. MARATHON, FL 33050	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
12. 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 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: <i>Jack Deitemeyer</i> Jack Deitemeyer <i>4/12/04</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #		