## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000005240

Entity Name: DEVONSHIRE FORTE INC.

FILED Mar 21, 2005 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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1521 ALTON RD., #202 MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

1521 ALTON RD., #202 MIAMI BEACH, FL 33139 STE 120, PMB 258 AUSTIN, TX 78750 US

FEI Number: 14-1809638 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GUSS, MICHAEL 1521 ALTON RD., #202 MIAMI BEACH, FL 33139 US

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CDP ( ) Delete Title: CDP (X) Change ( ) Addition Name: PONYATOVSKY, SERGEY Name: LEE, STERLING S

Address: 1521 ALTON RD., #202 Address: 13492 RESEARCH BLVD., STE 120 PMB 258

City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: AUSTIN, TX 78750

Title: DVT ( ) Delete Title: DV (X) Change ( ) Addition Name: GUSS, MICHAEL Name: GUSS, MICHAEL

 Name:
 GUSS, MICHAEL
 Name:
 GUSS, MICHAEL

 Address:
 1521 ALTON RD., #202
 Address:
 1521 ALTON RD., #202

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33139

Name: SANTIAGO, KATHIA I Name: JARMAN, N M

Address: 1521 ALTON RD., #202 Address: 13492 RESEARCH BLVD, STE 120 PMB 258

City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: AUSTIN, TX 78750 US

Title: ( ) Delete Title: DS ( ) Change (X) Addition

 Name:
 Name:
 FREUND, AUGISTINE

 Address:
 Address:
 13492 RESEARCH BLVD, STE120 PMB 258

City-St-Zip: City-St-Zip: AUSTIN, TX 78750

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: STERLING S. LEE CDP 03/21/2005