

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000005475 (9)

1. Corporation Name

DEGUIRE INC.



Principal Place of Business

C/O WEISS
768 BOUGAINVILLE LANE
VERO BEACH FL 32963

Mailing Address

C/O WEISS
768 BOUGAINVILLE LANE
VERO BEACH FL 32963

3. Date Incorporated or Qualified

12/02/1993

3a. Date of Last Report

02/21/1995

4. FEI Number

59-3229599

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 C/O WEISS

26 C/O WEISS

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 503 N. RIVER OAKS DRIVE

27 503 N. RIVER OAKS DRIVE

City & State

City & State

23 INDIAN LANTIC

28 INDIAN LANTIC FLA

Zip

Country

Zip

Country

24 FLA

25 U.S.

29 32903

30 U.S.

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WEISS, HOWARD M
768 BOUGAINVILLE LANE
VERO BEACH FL 32963

81 Name

HOWARD M. WEISS

82 Street Address (P.O. Box Number is Not Acceptable)

503 N. RIVER OAKS DRIVE

83

INDIAN LANTIC, FLA

84 City

FL

85 Zip Code

32903

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

Howard M. Weiss

(NOTE: Registered Agent signature required when reinstating)

4/24/96

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **DCP**
STREET ADDRESS **MIRON, GERALD**
CITY-ST-ZIP **APARTADO POSTAL 95-107 SAN JOSE 2000**
COSTA RICA, CENTRO AMERICA

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 on an attachment with an address.

SIGNATURE:

Howard M. Weiss
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

407-726-8630

CR2E034 (12/95)