


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2005 08:00 AM
Secretary of State

DOCUMENT # L38475
 1. Entity Name
DEBORAH JAMES ENTERPRISES, INC.



Principal Place of Business: **1843 NW 124 AVE. C CORAL SPRINGS, FL 33071-7890 US**
 Mailing Address: **% DAVID C. HARDIN 500 E BROWARD BLVD #1950 FT LAUDERDALE, FL 33394-3079**

DO NOT WRITE IN THIS SPACE



01112005 No Chg-P CR2E034 (10/03)

4. FEI Number: **59-2778310** Applied For: Not Applicable:
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
HARDIN, DAVID C. 500 E BROWARD BLVD SUITE 1950 FT LAUDERDALE, FL 33394

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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, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	SHUART, STEVEN
STREET ADDRESS	1843 NW 124 AVE
CITY-ST-ZIP	CORAL SPRINGS, FL 330717890
TITLE	DVS
NAME	SHUART, DEBORAH
STREET ADDRESS	1843 NW 124 AVE.
CITY-ST-ZIP	CORAL SPRINGS, FL 330717890
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Steven Shuart **Steven Shuart** 4/29/05 Date: 954 610 4113 Daytime Phone #