## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000086888

FILED Apr 25, 2005 Secretary of State

Entity Name: DE LEPINE ENTERPRISES INTERNATIONAL, INC.

Current Principal Place of Business:		New Principal Place of Business:		
2630 SW : HOLLYW	55 AVE DOD, FL 3302	34159		
Current Mailing Address:		New Mailing Address:		
2630 SW : HOLLYW(	55 AVE DOD, FL 3302	34159		
FEI Number	: 65-0371346	FEI Number Applied For ( )	FEI Number Not Applicabl	e ( ) Certificate of Status Desired ( )
Name and	Address of C	Current Registered Agent:	Name and Add	dress of New Registered Agent:
2630 SW :		YN S 34159 US		
110221	JOD, FL 3302			
The above	·		e purpose of changing its re	gistered office or registered agent, or both,
The above	named entity e of Florida. RE:	submits this statement for the		gistered office or registered agent, or both,
The above in the State	named entity e of Florida. RE:			egistered office or registered agent, or both,  Date
The above in the State SIGNATU	named entity e of Florida. RE: Electror	submits this statement for the		
The above in the State SIGNATUI	named entity e of Florida. RE: Electror	submits this statement for the nic Signature of Registered Agrees g Trust Fund Contribution ( ).	gent	
The above in the State SIGNATUI	e named entity e of Florida.  RE: Electror mpaign Financin S AND DIREC  D ( DE LEPINE, G) 2630 SW 55 A)	submits this statement for the nic Signature of Registered A g Trust Fund Contribution ( ).  ETORS:  ) Delete WENDOLYN S	gent	Date
The above in the State SIGNATUI SIGNATUI CARRELECTION CAR	e named entity e of Florida.  RE:  Electror  mpaign Financin  S AND DIREC  D ( DE LEPINE, G) 2630 SW 55 A' HOLLYWOOD,  VP ( CLARK, ANGEI 2630 SW 55 A'	submits this statement for the nic Signature of Registered A g Trust Fund Contribution ( ).  CTORS:  ) Delete WENDOLYN S VE FL 330234159  ) Delete LA MARIE	ADDITIONS/C Title: Name: Address:	Date HANGES TO OFFICERS AND DIRECTOR

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: GWENDOLYN S. DE LEPINE D 04/25/2005