## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 31, 2006 08:00 AM Secretary of State

DOCUMENT # P02000031822  T. Entry target  DELAND PROPERTIES INVESTMENTS, INC.  Principal Place of Disulates  Making Address  Set NE 127 ST  MAMM, P. 33161 US  Set M. Art. R. etc.  O1242008 Chg.P. CR2C04 (11/05)  E. Funcipal Place of Disulates  Suita. Art. R. etc.  O1242008 Chg.P. CR2C04 (11/05)  E. Funcipal Place of Disulates  Suita. Art. R. etc.  O1242008 Chg.P. CR2C04 (11/05)  E. Funcipal Place of Disulates  Suita. Art. R. etc.  O1242008 Chg.P. CR2C04 (11/05)  E. Funcipal Place of Disulates  Suita. Art. R. etc.  O1242008 Chg.P. CR2C04 (11/05)  E. Funcipal Place of Disulates  Suita. Art. R. etc.  O1242008 Chg.P. CR2C04 (11/05)  E. Funcipal Place of Disulates  E. Nemo and Address of Current Registered Agent.  RIVERS, RONALD H  Street Address (P.O. Box Number is Not Acceptable)  RIVERS, RONALD H  Street Address (P.O. Box Number is Not Acceptable)  RIVERS, RONALD H  Street Address (P.O. Box Number is Not Acceptable)  RIVERS, RONALD H  Street Address (P.O. Box Number is Not Acceptable)  RIVERS, RONALD H  Street Address (P.O. Box Number is Not Acceptable)  RIVERS, RONALD H  Street Address (P.O. Box Number is Not Acceptable)  RIVERS, RONALD H  Street Address (P.O. Box Number is Not Acceptable)  RIVERS, RONALD H  Street Address (P.O. Box Number is Not Acceptable)  RIVERS, RONALD H  Street Address (P.O. Box Number is Not Acceptable)  RIVERS, RONALD H  Street Address (P.O. Box Number is Not Acceptable)  RIVERS, RONALD H  Street Address (P.O. Box Number is Not Acceptable)  RIVERS, RONALD H  Street Address (P.O. Box Number is Not Acceptable)  RIVERS, RONALD H  Street Address (P.O. Box Number is Not Acceptable)  RIVERS, RONALD H  Street Address (P.O. Box Number is Not Acceptable)  RIVERS, RONALD H  Street Address (P.O. Box Number is Not Acceptable)  RIVERS, RONALD H  Street Address (P.O. Box Number is Not Acceptable)  RIVERS, RONALD H  Street Address (P.O. Box Number is Not Acceptable)  RIVERS, RONALD H  Street Address (P.O. Box Number is Not Acceptable)  RIVERS, RONALD H  Street Address (P.O. Box Number is Not Acceptable	ANNUAL REPORT						Secretary of State				
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City & State  Name  Name  Street Address of Current Registered Agent  Name  Street Address of New Registered Agent  City & FL Zip Code  Street Address of New Registered Agent  City & FL Zip Code  Street Address of New Registered Agent  City & FL Zip Code  Street Address of New Registered Agent  City & FL Zip Code  Street Address of New Registered Agent  City & FL Zip Code  Street Address of New Registered Agent  City & FL Zip Code  Street Address of New Registered Agent  City & FL Zip Code  Street Address of New Registered Agent  City & FL Zip Code  Street Address of New Registered Agent  City & FL Zip Code  Street Address of New Registered Agent  City & FL Zip Code  Street Address of New Registered Agent  City &	2. Principal Place of Business		3. Mailing Address								
Zip Country Zip Country 5. Certificate of Status Desired S. 37.5 Additional Fee Recyclind  8. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Fee Recyclind  RIVERS, RONALD H 905 N.E. 127 ST MIAMI, FL 33161  City FL Zip Code	Sulte, Apt. #, etc.		Suite, Apt. #, etc.		01242005	Chg-P	CR2E034 (	11/05)			
S. Commicate of Statuse Desired  Fee Required  For Required  7. Name and Address of New Registered Agent  Name  Name  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zo Core  FL	City & State		City & State						<del></del>		
Name   Street Address (P.O. Box Number is Not Acceptable)   City   FL   Zep Code	Zip			Coun	ilry			Fee L	Required		
Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Core  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, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State		6. Name and Address of Current	Registered Agent		Name	7. Name and	Address of New R	legistered Ager	ıt		
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8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature from the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  PLE NOWITI FEE Is \$150.00  After May 1, 2005 Fee will be \$550.00  After May 1, 2005 Fee will be \$550.00  P. Election Campaign Financing   \$5.00 May Be Added to Fees   Added to Fees   Added to Fees    TITLE   DISTRICT ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE   DISTRICT ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE   DISTRICT ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE   DISTRICT ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE   DISTRICT ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE   DISTRICT ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE   DISTRICT ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE   DISTRICT ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE   DISTRICT ADDITIONS/CHANGES CITY-ST-ZIP   DISTRICT ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE   DISTRICT ADDITIONS/CHANGES CITY-ST-ZIP   DISTRICT ADDITIONS/CHANGES CITY-ST-ZIP	965 N.E 12	27 ST			Street Address (	P.O. Box Number	r is Not Acceptable	<del></del>			
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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 eath; that I am an efficiency of the corporation or the receiver of 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 a podderst, with all other like empowered.	12, i hereby	certily that the information supplied with	n this filing does not qualify to			in Chapter 119.	Florida Statutes.	I further certify (	hat the in	formation	
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