

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0414376 AV

DOCUMENT # P02000033081

1. Entity Name
DEZYN, INC.



FILED

03 APR 15 AM 9:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
14 S SWINTON AVE
DELRAY BCH FL 33344

Mailing Address
14 S SWINTON AVE
DELRAY BCH FL 33344

2. Principal Place of Business

255 NE 6TH AVE

3. Mailing Address

255 NE 6TH AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

DELRAY BEACH, FL

City & State

DELRAY BEACH, FL

4. FEI Number

51-3446192

Applied For

Not Applicable

Zip

33483

Country

USA

Zip

33483

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SMITHER, ROBERT M JR
14 S SWINTON AVE
DELRAY BCH FL 33344

7. Name and Address of New Registered Agent

Name

WINTZER, WILLIAM R.

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

255 NE 6TH AVE.

City

DELRAY BEACH

FL

Zip Code

33483

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

William R. Wintzer

WILLIAM R. WINTZER A/T

4/14/03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP
NAME GOODYEAR, KIM
STREET ADDRESS 8018 NDCBU
CITY-ST-ZIP TAOS NM 87571 ☐ Delete

TITLE DV S
NAME SAN MARTIN, MARTA
STREET ADDRESS 8018 NDCBU
CITY-ST-ZIP TAOS NM 87571 ☐ Delete

TITLE TS
NAME SMITHER, ROBERT M JR
STREET ADDRESS 14 S SWINTON AVE
CITY-ST-ZIP DELRAY BCH FL 33344 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
900016085969
04/15/03--01098--003 **150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
~~WINTZER, WILLIAM R.~~

TITLE CD
NAME WORRELL, THOMAS E. JR
STREET ADDRESS 255 NE 6TH AVE
CITY-ST-ZIP DELRAY BEACH, FL 33483 ☐ Change ☒ Addition

TITLE A/T
NAME WINTZER, WILLIAM R.
STREET ADDRESS 255 NE 6TH AVE
CITY-ST-ZIP DELRAY BEACH, FL 33483 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

WILLIAM R. WINTZER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

WILLIAM R. WINTZER A/T 4/14/03 (561) 243-2400

CR2E034 (10/02)