

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000085382

FILED  
May 07, 2004  
Secretary of State

Entity Name: D & T OF DAVIE, INC.

**Current Principal Place of Business:**

420 MESSHA TRAIL  
MERRITT ISLAND, FL 32953

**New Principal Place of Business:**

**Current Mailing Address:**

420 MESSHA TRAIL  
MERRITT ISLAND, FL 32953

**New Mailing Address:**

FEI Number: 14-1842731

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KOPITAS, DELORSE  
420 MESSHA TRAIL  
MERRITT ISLAND, FL 32953 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: KOPITAS, DELORSE  
Address: 420 MESSHA TRAIL  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D ( ) Delete  
Name: ADAMS, TONYA  
Address: 140 BONAVENTURE #206  
City-St-Zip: WESTON, FL 33326

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: TONYA ADAMS

VPR

05/07/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date