

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 22, 2004 8:00 am
Secretary of State

03-22-2004 90057 039 ***150.00

DOCUMENT # P02000094174

1. Entity Name

DEANTI INVESTMENTS, INC.



Principal Place of Business

1320 NW 97TH TERRACE
PEMBROKE PINES FL 33024

Mailing Address

1320 NW 97TH TERRACE
PEMBROKE PINES FL 33024

2. Principal Place of Business

5401 SW 5th Street

3. Mailing Address

5401 SW 5th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Plantation FL

City & State

Plantation FL

Zip 33317

Country USA

Zip 33317

Country USA

4. FEI Number

82-0563369

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, DAVEAN M
1320 NW 97TH TERRACE
PEMBROKE PINES FL 33024

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

DAVEAN Williams - President 3/17/04

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 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 PD ☐ Delete
NAME WILLIAMS, DAVEAN M
STREET ADDRESS 1320 NW 97TH TERRACE
CITY-ST-ZIP PEMBROKE PINES FL 33024

TITLE VSD ☐ Delete
NAME REPICI, CHRISTINA M
STREET ADDRESS 931 NW 140TH STREET
CITY-ST-ZIP MIAMI FL 33168

TITLE T ☐ Delete
NAME REPICI, MARY J
STREET ADDRESS 1320 NW 97TH TERRACE
CITY-ST-ZIP PEMBROKE PINES FL 33024

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME 5401 SW 5th Street
STREET ADDRESS Plantation, FL 33317
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME 5401 SW 5th Street
STREET ADDRESS Plantation, FL 33317
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME 5401 SW 5th Street
STREET ADDRESS Plantation, FL 33317
CITY-ST-ZIP

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

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

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

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:

DAVEAN Williams 3/17/04 954-274-3776

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #