

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 10, 2004 8:00 am
Secretary of State

05-10-2004 90476 048 ***150.00

DOCUMENT # P03000040664

1. Entity Name
DENN INVESTMENTS, INC.



Principal Place of Business
**6800 WEST 16TH DRIVE
APT. 210
HIALEAH, FL 33014**

Mailing Address
**6800 WEST 16TH DRIVE
APT. 210
HIALEAH, FL 33014**

2. Principal Place of Business
15544 NW 82ND PLACE
Suite, Apt. #, etc.

3. Mailing Address
15544 NW 82ND PLACE
Suite, Apt. #, etc.



04272004 Chg-P CR2E034 (10/03)

City & State
MIAMI LAKES, FL
Zip **33016** Country **USA**

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Zip **33016** Country **USA**

4. FEI Number **11-3689487**
Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**RODRIGUEZ, DENNIS O
6800 WEST 16TH DRIVE
APT. 210
HIALEAH, FL 33014**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
15544 NW 82ND PLACE
City **MIAMI LAKES** **FL** Zip Code **33016**

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

**FILE NOW! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **RODRIGUEZ, DENNIS O**
CITY-ST-ZIP **6800 WEST 16TH DR. APT. 210
HIALEAH, FL 33014**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
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NAME
STREET ADDRESS
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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
STREET ADDRESS **15544 NW 82 ND PLACE**
CITY-ST-ZIP **MIAMI LAKES, FL 33016**

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

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DENNIS O. RODRIGUEZ 4/27/04 (786) 417-0882

Date Daytime Phone #