

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000051306

Entity Name: DEANE SOLUTIONS INC.

FILED  
Jul 01, 2004  
Secretary of State

## Current Principal Place of Business:

2090 NW 99TH AVE  
PEMBROKE PINES, FL 33024

## New Principal Place of Business:

## Current Mailing Address:

2090 NW 99TH AVE  
PEMBROKE PINES, FL 33024

## New Mailing Address:

FEI Number: 43-2014603

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 US

## Name and Address of New Registered Agent:

GAMEZ, MARIA  
2090 NW 99TH AVE  
PEMBROKE PINES, FL 33024 US

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: MARIA GAMEZ

07/01/2004

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: DEANE, CLAUDIO  
Address: 2090 NW 99TH AVE  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D ( ) Delete  
Name: GAMEZ, MARIA  
Address: 2090 NW 99TH AVE  
City-St-Zip: PEMBROKE PINES, FL 33024

## 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: MARIA GAMEZ

D

07/01/2004

Electronic Signature of Signing Officer or Director

Date