2004 FOR PROFIT CORPORATION

Jul 01, 2004 8:00 am Secretary of State **ANNUAL REPORT** 04-29-2004 90274 001 ***125.00 DOCUMENT # P03000113334 07-01-2004 90001 047 ****25.00 D.T. PETER, INC. Principal Place of Business Mailing Address 54059404 1774 SE GASKINS CIRCLE 1774 SE GASKINS CIRCLE PORT ST. LUCIE, FL 34952 PORT ST. LUCIE, FL 34952 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc.: Suite, Apt. #, etc. CR2E034 (10/03) City & State City & State 4. FEI Number Applied For <u>30-02010235</u> Not Applicable Ζiρ Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PETER, DAVID T Street Address (P.O. Box Number is Not Acceptable) 1774 SE GASKINS CIRCLE PORT ST. LUCIE, FL 34952 City 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 SIGNATURE. JNOTE: Redistered Agent programs required wise reinstance DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150,00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PRES Fres A Delete THOSE TITLE Change Addition Peter, DAVIO T NAME PETER, DAVID T NAME 128 S.W. PARR Drive STREET ADDRESS 1774 SE GASKINS CIRCLE STREET ADDRESS CITY-ST-ZIP PORT ST. LUCIE, FL 34952 CITY-ST-ZIP 34953 Port SpiNT LUCIE ☐ Datete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS 10 CITY-ST-ZIP City-ST-ZIP MILE Delete TITLE ☐ Change ■ Addition HAME NAME STREET ACCIDENCES STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Change ☐ Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ME ☐ Delete TOLE Change ■ Addition 3 NAME HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Addition ☐ Oeleta Charge

4/29

12. I hereby certify that the information supplied with this filling 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

STREET ADDRESS CITY-ST-ZIF

HARS

SIGNATURE:

HALLE

STREET ADDRESS

-772-215-9683

Affachment

D.T. Peter, Inc.

128 S.W. Paar Drive Port Saint Lucie, Florida 34953 772-344-6612 54059404

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June 25, 2004

To: Florida Department of State Attn: Annual Reports Section Subject: D.T. Peter, Inc.

From: David T. Peter___

Reference Number: P03000111334

Re: Address Change and Delay

To Whom It May Concern:

This Letter is to confirm the additional \$25.00 needed to complete the annual report is enclosed and to request a reprieve on the late charge for filing late. I inadvertently wrote the check for the wrong amount. Because I recently moved, the letter stating this fact was delayed in reaching me. As you can see from the enclosed envelope, the original postmark date was May 18, 2004. However, I did not receive this letter until June 24, 2004. The forwarding sticker is marked June 22, 2004. This created a 5-week gap. Obviously, this prevented me from responding in the allowed time. Please advise if the late charge can be waved. I would like to straighten this out with the state as quickly as possible. I have also noted the address change on the report.

Thank you for your attention to this matter,

David T. Peter

President