

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2005 8:00 am
Secretary of State

07-28-2005 90009 001 ***150.00
07-28-2005 90009 002 *****8.75

DOCUMENT # P04000116683

1. Entity Name
DEBBE'S CURTAIN CALL, INC.



Principal Place of Business
**830 NW 10TH TERRACE
STUART, FL 34994 US**

Mailing Address
**830 NW 10TH TERRACE
STUART, FL 34994 US**

66025131



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07142005 Chg-P CR2E034 (10/03)

4. FEI Number

36-4559156

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BINET, DEBORAH A
830 NW 10TH TERRACE
STUART, FL 34994**

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

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

**P
BINET, DEBORAH A
830 NW 10TH TERRACE
STUART, FL 34994**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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CITY- ST- ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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☐ Change ☐ Addition

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:

Deborah Binet

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/26/05 712-692 8722

Date Daytime Phone #

ATTACHMENT

2082

6-5-05

PO400011683
64025131

DIVISION OF CORPORATIONS:

I RECEIVED THIS POSTCARD OF NOTICE OF INTENT TO DISSOLVE BUT DID NOT RECEIVE ANY PRIOR POST CARD WITH THE OPTION TO PAY RENEWAL. THIS IS MY FIRST YEAR IN FLORIDIA AND I AM NOT AWARE OF HOW THE SYSTEM WORKS YET. I WENT ON YOUR WEB SITE TO DOWN LOAD THE FORM TO MAIL IN BUT MY COMPUTER WOULD NOT ACCEPT IT.

THERE WAS ALSO A PLACE TO CHECK IF YOU DID NOT RECEIVE ANY PRIOR NOTIFICATION WHICH I CHECKED BUT IT WOULD NOT ACCEPT MY OR I DO NOT HAVE A FEI NUMBER.

I AM ENCLOSING A CHECK FOR \$150.00 FOR MY RENEWAL . IF THERE IS A PAPER LISTING THE SCHEDULE FOR ALL THE FORMS AND PAYMENTS NEEDED PLEASE SEND ME A COPY. THANK YOU

DEBORAH BINET
830 NW 10TH TERRACE
STUART, FL 34994
772-692-8722

Deborah Binet

TIN 36-4559156