


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000116902	
1. Entity Name DES VENTURES, INC.	

Principal Place of Business 2191 INDIAN ROAD WEST PALM BEACH, FL 33409	Mailing Address 2191 INDIAN ROAD WEST PALM BEACH, FL 33409
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DO NOT WRITE IN THIS SPACE



02272006 No Ctg-P CR2E034 (11/05)

4. FEI Number 66-2477070	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SUKER, DAVID E 2191 INDIAN ROAD WEST PALM BEACH, FL 33409

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8. The above named entity submits the 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	DATE
<small>(Print or typed or printed name of registered agent and then applicable)</small>	<small>(DATE Registered Agent acquiesces to appointment)</small>

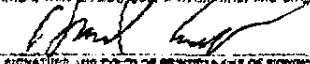
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE PSTD	NAME SUKER, DAVID E
STREET ADDRESS 2191 INDIAN ROAD	CITY, STATE, ZIP WEST PALM BEACH, FL 33409
TITLE	NAME
STREET ADDRESS	CITY, STATE, ZIP
TITLE	NAME
STREET ADDRESS	CITY, STATE, ZIP
TITLE	NAME
STREET ADDRESS	CITY, STATE, ZIP

DO NOT WRITE IN THIS SPACE

1100000463554
03/21/06-00082-008 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 067, 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: 	TITLE: PRESIDENT	DATE: 2/28/06	FILE NO: (521) 582-5475
<small>SIGNATURE AND TITLE OR PRINTED NAME OF BORNE, OFFICER OR DIRECTOR</small>		<small>DATE</small>	<small>FILE NO</small>