## 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P04000171972

Entity Name: D=MC SQUARED, INC.

FILED Nov 08, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

417 GOOLSBY BLVD 1000 W. MCNAB ROAD DEERFIELD BEACH, FL 33442

POMPANO BEACH, FL 33069

**Current Mailing Address: New Mailing Address:** 

417 GOOLSBY BLVD 1000 W. MCNAB ROAD

DEERFIELD BEACH, FL 33442 POMPANO BEACH, FL 33069

FEI Number: 22-3905003 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

J.P. ACCOUNTING SERVICES MARTIN, DAVID E PRES 2208 S CYPRESS BEND DR #107 1000 W. MCNAB ROAD

POMPANO BEACH, FL 33069 POMPANO BEACH, FL 33069 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: DAVID E. MARTIN 11/08/2005

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

MARTIN, DAVID E MARTIN, DAVID E Name: Name: 417 GOOLSBY BLVD 1000 W. MCNAB Address: Address:

City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: DEERFIELD BEACH, FL 33069

Title: Title: VΡ () Delete (X) Change ( ) Addition

CAPERTON, JAMES E CAPERTON, JAMES E Name: Name: 417 GOOLSBY BLVD 1000 W. MCNAB ROAD Address: Address: DEERFIELD BEACH, FL 33442 POMPANO BEACH, FL 33069 City-St-Zip: City-St-Zip:

Title: Title: ( ) Change (X) Addition () Delete

Name: LIMA, OCTAVIO L Name: 1000 W. MCNAB ROAD Address Address: City-St-Zip: City-St-Zip: POMPANO BEACH, FL 33069

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.

Ρ SIGNATURE: DAVID E. MARTIN 11/08/2005