

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000004397

Entity Name: DES-MATT, INC.

FILED  
Jan 30, 2007  
Secretary of State

## Current Principal Place of Business:

1400 CANOPY OAKS DRIVE  
CLERMONT, FL 34715

## New Principal Place of Business:

2112 CLERMONT STREET  
WINTER HAVEN, FL 33881

## Current Mailing Address:

1400 CANOPY OAKS DRIVE  
CLERMONT, FL 34715

## New Mailing Address:

2112 CLERMONT STREET  
WINTER HAVEN, FL 33881

FEI Number: 20-4095206

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHANKS, JACINTA  
1400 CANOPY OAKS DRIVE  
CLERMONT, FL 34715 US

## Name and Address of New Registered Agent:

SHANKS, JACINTA  
2112 CLERMONT STREET  
WINTER HAVEN, FL 33881 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: JACINTA SHANKS

01/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P. ( ) Delete  
Name: SHANKS, JACINTA  
Address: 1400 CANOPY OAKS DRIVE  
City-St-Zip: CLERMONT, FL 34715

Title: VP. ( ) Delete  
Name: SHANKS, DANNY L  
Address: 1400 CANOPY OAKS DRIVE  
City-St-Zip: CLERMONT, FL 34715

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P. (X) Change ( ) Addition  
Name: SHANKS, JACINTA  
Address: 2112 CLERMONT STREET  
City-St-Zip: WINTER HAVEN, FL 33881

Title: VP. (X) Change ( ) Addition  
Name: SHANKS, DANNY L  
Address: 2112 CLERMONT STREET  
City-St-Zip: WINTER HAVEN, FL 33881

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: JACINTA SHANKS

P.

01/30/2007

Electronic Signature of Signing Officer or Director

Date