

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000143964

FILED  
Apr 08, 2011  
Secretary of State

Entity Name: D S ENTERPRISES INC FLORIDA DIVISION

**Current Principal Place of Business:**

2464 BAY CIRCLE  
PALM BEACH GARDENS, FL 33410

**New Principal Place of Business:**

**Current Mailing Address:**

2464 BAY CIRCLE  
PALM BEACH GARDENS, FL 33410

**New Mailing Address:**

FEI Number: 74-3194156

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ST PETER, DAVID P  
2464 BAY CIRCLE  
PALM BEACH GARDENS, FL 33410 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P,  
Name: ST PETER, DAVID P  
Address: 2464 BAY CIRCLE  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VP,  
Name: ST PETER, DAVID P  
Address: 2464 BAY CIRCLE  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: SEC  
Name: ST PETER, DAVID P  
Address: 2464 BAY CIRCLE  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: TRES  
Name: ST PETER, DAVID P  
Address: 2464 BAY CIRCLE  
City-St-Zip: PALM BEACH GARDENS, FL 33410

I hereby 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 all other like empowered.

SIGNATURE: DAVID ST PETER

PRES

04/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date