

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000023896

FILED  
Apr 20, 2011  
Secretary of State

**Entity Name:** D.E. ENTERPRISES MULTI-SERVICES COMPANY, INC.

**Current Principal Place of Business:**

3690 INVERRARY DR.  
3G  
LAUDERHILL, FL 33319

**New Principal Place of Business:**

197 LAKEVIEW DR.  
101  
WESTON, FL 33326

**Current Mailing Address:**

3690 INVERRARY DR.  
3G  
LAUDERHILL, FL 33319

**New Mailing Address:**

197 LAKEVIEW DR.  
101  
WESTON, FL 33326

**FEI Number:** 80-0371608

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RAMIREZ ESTEPAN, RAFAEL D SR.  
3690 INVERRARY DR.  
3G  
LAUDERHILL, FL 33319 US

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

RAMIREZ ESTEPAN, RAFAEL D SR.  
197 LAKEVIEW DR.  
101  
WESTON, FL 33326 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: RAFAEL DAVID RAMIREZ ESTEPAN

04/20/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: RAMIREZ ESTEPAN, RAFAEL D SR.  
Address: 197 LAKEVIEW DR.  
City-St-Zip: WESTON, FL 33326

Title: VP  
Name: TOSTA, KARLA G MS.  
Address: 197 LAKEVIEW DR.  
City-St-Zip: WESTON, FL 33326

Title: CFO  
Name: RAMIREZ ESTEPAN, VICTOR R MR.  
Address: 197 LAKEVIEW DR.  
City-St-Zip: WESTON, FL 33326

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: RAFAEL DAVID RAMIREZ ESTEPAN

CEO

04/20/2011

Electronic Signature of Signing Officer or Director

Date