

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2005 08:00 AM
Secretary of State

DOCUMENT # P92000010621
 1. Entity Name
 DEVETTE CORPORATION



Principal Place of Business
 9255 S.W. 63RD STREET
 MIAMI, FL 33173

Mailing Address
 9255 S.W. 63RD STREET
 MIAMI, FL 33173

DO NOT WRITE IN THIS SPACE



01032005 No Chg-P CR2E034 (10/03)

4. FEI Number
 65-0375167

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SACKS, YVETTE
 9255 S.W. 63RD STREET
 MIAMI, FL 33173

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Yvette Sacks; Yvette Sacks* 1-4-5
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD SACKS, YVETTE 9255 S.W. 63RD STREET MIAMI, FL 33173
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP SACKS, HOWARD 9255 S.W. 63RD STREET MIAMI, FL 33173
TITLE NAME STREET ADDRESS CITY - ST - ZIP	2VP SACKS, ELLIOT 9255 S.W. 63RD STREET MIAMI, FL 33173
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 607, 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: *Yvette Sacks - President* 1-4-5 305271-7905
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Yvette Sacks