FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

'95 MAR -7 AM 11:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000035544 (4)

1. Corporation Name
DEBEAR'S INC.

Principal Place of Business	Mailing Address
215 PAUL MCCLURE CT. CASSELBERRY FL 32707	215 PAUL MCCLURE CT. CASSELBERRY FL 32707

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 05/11/1993
3a. Date of Last Report: 04/11/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)

4. FEI Number: 59-3184569 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DESANTOLA, GARY J
215 NETTLEWOOD LANE
FERN PARK FL 32730

10. Name and Address of New Registered Agent

81 Name: DeSANTOLA, GARY J.
82 Street Address (P.O. Box Number is Not Acceptable): 215 PAUL MCCLURE COURT
83
84 City: CASSELBERRY FL 85 Zip Code: 32707

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: GARY J. DeSANTOLA (PRES.) DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required for filing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	11 TITLE	PRES	☒ Change ☐ Addition
NAME	DESANTOLA, GARY J	12 NAME	DeSANTOLA, GARY J.	
STREET ADDRESS	215 NETTLEWOOD LANE	13 STREET ADDRESS	215 PAUL MCCLURE CT.	
CITY-ST-ZIP	FERN PARK FL 32730	14 CITY-ST-ZIP	CASSELBERRY, FL 32707	
TITLE	V	21 TITLE	V.P.	☒ Change ☐ Addition
NAME	DESANTOLA, ALICE M	22 NAME	DeSANTOLA, ALICE M.	
STREET ADDRESS	215 NETTLEWOOD LANE	23 STREET ADDRESS	215 PAUL MCCLURE CT.	
CITY-ST-ZIP	FERN PARK FL 32730	24 CITY-ST-ZIP	CASSELBERRY, FL 32707	
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: GARY DeSANTOLA (PRES.)
SIGNATURE AND TYPED OR PRINTED NAME OF BIDDING OFFICER OR DIRECTOR — Date — Daytime Phone #

0037400 CP