FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000007774 (9)

DEE DESIGNS ENTERPRISES, INC.

BOCA RATON FL 33432

Principal Place of B	usiness	Mail	ling Address								
1400 SOUTH OCEAN BLVD. #605 N. BOCA RATON FL 33432			1400 SOUTH OCEAN BLVD. #605 N. BOCA RATON FL 33432-8527								
							3.	Date Incorporated or Qualified 01/30/1995	}	ate of L	ast Report
2. Principal Place of Business		2a.	2a, Mailing Address				4.	FEI Number			Applied For
21		26					1	65-0562088			Not Applicable
Suite, Apt. #, etc.		27	Suite, Apt. #, etc.			5.	Certificate of Status Desired			75 Additional se Required	
City & State		28	City & State				6.	Election Campaign Financing Trust Fund Contribution			.00 May Be Ided to Fees
Zip	Country 25	29	Zip	Cour	ilry		8.	This corporation has liability for in Florida Statutes	ntangible Yes		der s. 199.032,
g, Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent				
	T, DONNA UTH OCEAN BLVD. #6	805 N.		L	B1	Name Street Addre	ee (l	P.O. Boy Number is Not Acceptab	lo)		

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.

83 84 City

Street Address (P.O. Box Number is Not Acceptable)

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	(NOI)	Registered Agent argesture req	uired when reinstating) DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECT	ORS IN 12
TITLE	P	DELETE	1.1 TO LE	Chan	ge 🔲 Addition
NAME	BARNETT, DONNA		1.2 NAME		
STREET ADDRESS	1400 S. OCEAN BLVD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33432		1.4 CITY - ST - ZIP		
ITLE		DEFELE	2.1 TITLE	Chan	ge 🔲 Addilion
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>		2. 4 CITY - ST - 7IP		
TITLE	[DELETE	31 TITLF	Chan	ge 🔲 Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS	P.	
CITY-ST-ZIP	<u> </u>		3.4 CITY-ST-ZIP	·	
TITLE		DELETE	4.1 TITLE	☐ Chan	ge 🔲 Addition
NAME			4.2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP			4.4 City~St-ZiP		
TITLE		DELETE	5.1 TITLE	☐ Chan	ge 🔲 Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREFT ADDRESS		
CITY+ST-ZIP			54 CITY-ST-ZIP		
TITLE	į	DELETE	6.1 TITLE	Chan	ge 🔲 Addition
WME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP	ed in Section 119.07(3)(i), Florida Statutes. I further certify t	

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 it if changed, or on apparation with an address.

56/

FILED

May 14 1997 8:00am

Secretary of State

Zip Code