

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 # P 95000019987  
1. Corporation Name

D-SQUARED DESIGNS, INC.

Principal Place of Business

Mailing Address

1006 EAGLE DR  
WINTER HAVEN, FL 33881

1006 EAGLE DR  
WINTER HAVEN, FL  
33881

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

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3. Date Incorporated or Qualified

03/09/1995

3a. Date of Last Report

04/08/1996

4. FEI Number

59-3301013

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

10. Name and Address of New Registered Agent

DIERKSHEIDE, ALLENE M.  
1006 EAGLE DR  
WINTER HAVEN FL 33881

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

☐

Change

☐

Addition

800002227258

-07/01/97-01009-002

\*\*\*\*165.00 \*\*\*\*165.00

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Change

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Addition

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Addition

14. I do hereby certify that the information supplied with this filing 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:

Alle M. Dierksheide

2-3 Jun 1997

765-584-2101

Ag. 10/2

97 JUN 25 AM 8:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CR2E034 (9/96)

pg. 2 of 2

23 June 1997

Annual Reports Filing  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

Dear Sir:

I may have a problem. My company name changed on December 27, 1996 to D-SQUARED DESIGNS, INC., and I received an Annual Report filing Form with my old name DALE DIERKSHEIDE, INC.

On the back the instructions of block No. 1 say this is not a form for name change so I have not used the preprinted form, but instead requested a blank form. This caused some delay. This is what I am submitting, however now I am past the deadline date and am requesting forgiveness of my late filing and acceptance of my check for \$165.00.

Sincerely,



Dale Dierksheide