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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMINT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000079969 (4)

D. DEER ENTERPRISES, INC.

FILED 97 0CT 13 AM IO: 03

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place of Business Mailing Address									
2401	PGA BL	VD.	2401 F	GA BLVD					
STE.	146		STE. 1	46					
	BEACH	PALM E	LM BEACH GARDENS, FL				3. Date Incorporated or Qualified 3a. Date of Last Report		
	D 11.011	33410	33410					10-18-95 7/11/96	
2. Principal P	lace of Busi		2a. Mailing Address					4. FEI Number 52-16/11502 Applied For	
21			26					Not Applicable	
Suite, Apt.	₹. etc.		Suite, Apt. #, etc.					SR 75 Additional	
22			27					5. Certificate of Status Desired Fee Required	
City & State			City & State					6. Election Campaign Financing \$5.00 May Be	
Zip Country			28					Trust Fund Contribution	
`	·		Zip Country			try		8. This corporation has liability for intangible tax under s. 199.032.	
24	a Mara	25	29		30			Florida Statutes Yes No	
	9, Name	and Address of Current	registered .	Agent		31	Name	10. Name and Address of New Registered Agent	
		DDD# *			'	"	ivame		
	-	BERT L.	82 S			12	Street Address (P.O. Box Number is Not Acceptable)		
		EACH LAKES BLVI) .			1			
SUITE			8			33			
WEST	PALM B	EACH, FL 3340	l		18	4	City	85 Zip Code	
								FL 6 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
11. Pursuant	to the provis	sions of Sections 607.0502	and 607,150	8, Florida Statu	ites, the abo)VO	-named co	proporation submits this statement for the purpose of changing its registered	
agent. I a	m familiar w	ith, and accept the obligation	ons of Secti	ion 607.0505, F	lorida Statu	tes		ration's board of directors. I hereby accept the appointment as registered	
SIGNATURE									
	Signature, types	for printed name of registered agent t				Qer	ni signature req	jured when reinstating) DATE	
12.		OFFICERS AND	DIRECTORS		13.			ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D			☐ DELETE	1,1 TITL			Change Addition	
NAME	DEER.	DANIEL C.			1.2 NAM	-	1	1000023212011	
STREET ADDRESS		FLAMINGO ROAD					ADDRESS	****550,00 *****550.00	
CITY-ST-ZIP		BEACH GARDENS,	11.	- December	1.4 CITY		r-ZIP		
TITLE	111111	Dinon Onkerne,	33410	☐ DELETE	2.1 THTL			Change Addition	
NAME			22410		2.2 NAN	ΙE			
STREET ADDRESS		**			2.3 STRI	EET /	address		
CITY - ST - ZIP					2 4 CIT		T- ZIP		
TITLE				ELETE	3.1 TITL	_	1	Change L Addition	
NAME					3.2 NAM	-			
STIEL ADDRESS					3.3 STR	EET A	ADDRESS		
CITY-ST-17IP				56.5	3.4. CIT	_	T-ZIP		
TITLE 🛴	l			☐ DELETE	4.1 TITL	E	1	L_I Change L_I Addition	
NAME :					4. 2 NA	Æ			
STREET ADDRESS					4.3 STRI	EET /	ADDRESS		
CITY-ST-ZIP					4.4 CITS	′-\$T	r-ZIP		
TITLE		j.		DELETE "	5.1 TITL	E		Change Addition	
NAME					5.2 NAM	Œ	ļ		
STREET ADDRESS					5 3 STRI	EET /	ADDRESS		
CITY-ST-ZIP					5.4 CITY	· ST	r-ZIP		
TITLE				☐ DELETE	6.1 TITL	E		Change Addition	
NAME					6.2 NAN	1E	Ī		
STREET ADDRESS					d 3 STRI	EET :	ADDRESS	(197)	
CITY - ST - ZIP					6.4 CITY	-ST	r-ZIP	(4)	
	ov certify that	t the information supplied	with this tiling	o does not que				ed in Section (119.07.3)(ii), Florida Statutes, I further certify that the	

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07 300. 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 report or trustee empowered to execute this report as required by Chapter 607. Florida Statutes, and that my name appears in Block 13 if chapter 607 and attachment with an address