

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 25, 2007 08:00 AM
Secretary of State

DOCUMENT # P96000002030



1. Entity Name

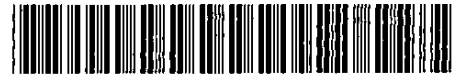
DEBERG & DEBERG, P.A.

Principal Place of Business

1915 TYRONE BLVD.
ST. PETERSBURG FL 33710
US

Mailing Address

1915 TYRONE BLVD.
ST. PETERSBURG FL 33710
US



2. Principal Place of Business - No P.O. Box #

1915 Tyrone Blvd.
Suite, Apt. #, etc.

3. Mailing Address

1915 Tyrone Blvd.
Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

St. Petersburg, FL

City & State

St. Petersburg, FL

4. FEI Number

59-3375161

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DEBERG, BENJAMIN G
1915 TYRONE BLVD.
ST. PETERSBURG FL 33710

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reissuing)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

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
PTSD
DEBERG, DANELL
7678 15TH AVENUE N.
ST. PETERSBURG FL 33710 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V
DEBERG, BENJAMIN G
1915 TYRONE BLVD.
SAINT PETERSBURG FL 33710 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
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CITY - ST - ZIP
☐ Change ☐ Addition

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DANELL G. DEBERG, PTSD 1/18/07 (727) 344-5573

Date

Daytime Phone #