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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P9600002073 (0)

DEEPA ENTERPRISES, INC.

	F. P.S.									
Principal Placi		Mailing Address				1 1994/921 199 1914 8141 8814 8914 8911 1841 9815 194 8814 1856 141 1491				
7136 IRONWOOD DRIVE ORLANDO FL 32818		7136 IRONWOOD DRIVE ORLANDO FL 32818-5849								
						3. Date Incorporated or Qualified 01/02/1996	3a. Date of	Last R	eport	
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Ap	plied For	
21		26				59-3349/23 Not Applicab				
Suite, Apt.	#, etc	Suite Apt. #, etc				5. Certificate of Status Desired		3.75 <i>/</i> Fee Re	Additional	
City & State	C	City & State				# Floring Committee Financial				
23	·	28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country	Zgo	Cou	ntry		This corporation has liability for in				
24	25	29	30	·			Yes No		. 130,002,	
1	9. Name and Address of Curre					10. Name and Address of New Reg	Istered Agen	t		
JAD	ONATH, CARMEN J			81	Name					
	6 IRONWOOD DRIVE		Į.	82	Street Add	ress (P.O. Box Number is Not Acceptable	(a)			
ORL			32	Street Addi	reas (io. box number is not Acceptable	ω,				
			Ì	83						
			ļ	84	City		Tec	T Zin i	Code	
				•	City		FL 85	Zipv	Coue	
SIGNATURE	Signature, type for pointed name of region of a OFFICERS AN	en and the cappusable (NOT VD DIRECTORS	L Hegistered	d Ager	nt signature requ	red when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIR	ECTOF	S IN 12	
TITLE	D	DELETE		1.1 TITLE				Change	Addition	
NAME	JADONATH, CARMEN J		1.2 NA	ME						
STREET ADDRESS	7136 IRONWOOD DRIVE		1.3 ST	REET	ADDRESS					
C:TY - ST - ZIP	ORLANDO FL 32818		1,4 CI	TY-ST	- 2(P					
TITLE	D	DELETE	2.1 Tr	TLE	Į.			Change	Addition	
NAME	JADONATH, HARRIS C		2 2 N/	AME						
STREET ADDRESS	7136 IRONWOOD DRIVE				ADDRESS					
C(TY - ST - ZIP	ORLANDO FL 32818	DELETE	2 4 0		T-ZIP			Change	Addition	
TITLE		□ DETEN E	3 1 TI 3 2 N/				L) (mange	L. AUGILION	
NAME STREET ADDRESS					address					
CHY-ST-ZIP				11Y-S						
TITEF		DELETE	4.1 TI		1-21			Change	Addition	
NAME			4 2 N		ĺ			•	_	
STREET ADDRESS					ADDRESS					
CITY-ST-Z-P				TY - S1						
TITLE	***************************************	☐ DELETE	5.1 TI					Change	Add:tion	
NAME			5.2 N	AME						
STREET ADDRESS			5.3 S	TREET	ADDRESS					
CITY-S1-ZIP			5.4 CI	TY - \$1	1-21P					
TITLE		DELETE	6.1 Yi			711		Change	Addition	
NAME			6.2 N	AME						
STREET ADORESS			6.3 S	TREET	ADDRESS					
CITY, ST. 700			540	itv. e	T_71D					

SIGNATURE:

appears in Block 12 or Block 13

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING DEFI

Carmen JADONATH

14. I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report of 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 copyligation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

1/8/97 407-292-4325

FILED

Jan 15 1997 8:00am

Secretary of State