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

PROFIT CORPORATION ANNUAL REPORT 1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000074838 (9)

| DEAKTER HOLDINGS, INC.   |   |   |  |                       |   |   |                                 |   |  |
|--|---|---|--|-----------------------|---|---|---------------------------------|---|--|
| Principal Place of Bus   | iness   | Mailing Address   | Mailing Address                                      |                       |   |   | EBH BLÍÓD                       | 10100 JOLOH 1015 1091                   |  |
| 1207 SENECA ST<br>JUPITER FL 33458<br>US                             |   |   | 1207 SENECA ST<br>JUPITER FL 33458<br>US             |                       |   | DO NOT WRITE IN THIS SPACE  |                                 |   |  |
|  |   |   |  |                       |   | 3. Date incorporated or Qualified   |                                 |   |  |
|  |   |   |  |                       |   | 09/03/1996  |                                 |   |  |
| 2. Principal Place of Business                                       |   | 2a. Mailing Addre   | 2a. Mailing Address                                  |                       | 4. FE),Number                           | ļ   | Applied For                     |   |  |
| 21   |   | 26  |  |                       |   | 65-0700546  |                                 | Not Applicat                            |  |
| Suite, Apt. #, etc.  |   | Suite, Apt. #, 6  | Suite, Apt. #, etc.                                  |                       | 5. Certificate of Status Desired        |   | 3.75 Additional<br>Fee Required |   |  |
| City & State   |   | City & State  | ,  |                       |   | 6. Election Campaign Financing  | \$                              | 5.00 May Be                             |  |
| 23   |   | 28  |  |                       |   | Trust Fund Contribution   |                                 | Added to Fees                           |  |
| Zip 24   | Country<br>25   | Zip<br>29   | <del></del>  |                       |   | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes No |                                 |   |  |
| 9. Name and Address of Current Registered Agent                      |   |   |  |                       |   | 10. Name and Address of New Registere   | d Agent                         | Ł                                       |  |
| ALEXANDI   | ER, LARRY B   |   |  | 81                    | Name                                    |   |                                 | _                                       |  |
|  | 'H FLAGLER DRIVE, SI<br>.M BEACH FL 33401-3   |   | 1100 82 Street Addr                                  |                       | ess (P.O. Box Number is Not Acceptable) |   |                                 |   |  |
| WEO! TAE   | IN BEACH 12 33401-C   | 747.5   |  | 83                    |   |   |                                 |   |  |
|  |   |   |  | 84                    | City                                    | F   | L 85                            | Zip Code                                |  |
| 11. Pursuant to the pr<br>office or registere<br>agent. I am familia | ovisions of Sections 607.<br>d agent, or both, in the S<br>ar with, and accept the ol | 0502 and 607.1508, Florida<br>tate of Florida. Such chang<br>bligations of, Section 607.0 | Statutes, the a<br>was authorize<br>505, Florida Sta | bove<br>d by<br>tutes | e-named corporations.                   | oration submits this statement for the purpose<br>on's board of directors. I hereby accept the ap           | of chan<br>ppointme             | ging its registere<br>ent as registered |  |

| SIGNATURE       |   |               |                              |  |           |                   |
|-----------------|---|---------------|------------------------------|--|-----------|-------------------|
|                 | Signature, typed or printed name of registered agent and title if applica | ble, (NOTE. F | Registered Agent signature   |  | DATE      |                   |
| 12.             | OFFICERS AND DIRECTORS  | 13.           | ADDITIONS/CHANGES TO OFFICER |  |           |                   |
| TITLE           | PD  | DELETE        | 1.1 TITLE                    |  | Change    | Addition Addition |
| NAME            | DEAKTER, MICHAEL  |               | 1,2 NAME                     |  |           |                   |
| STREET ADDRESS  | 1207 SENECA ST  |               | 1.3 STREET ADDRESS           |  |           |                   |
| CITY-ST-ZIP     | JUPITER FL  |               | 1,4 CITY-ST-ZIP              |  |           |                   |
| TITLE           | STD   | □ DELETE      | 2.1 TITLE                    |  | Change    | Addition          |
| NAME            | DEAKTER, PAULA J  |               | 2.2 NAME                     |  |           |                   |
| STREET ADDRESS  | 1207 SENECA STREET  |               | 2.3 STREET ADDRESS           |  |           |                   |
| CITY-ST-ZIP     | JUPITER FL  |               | 2. 4 CITY-ST-ZIP             |  | 8 <u></u> |                   |
| TITLE           | ··· <del></del>   | ☐ DELETE      | 3.1 TITLE                    |  | Change    | Addition Addition |
| NAME            |   |               | 3.2 NAME                     |  |           |                   |
| STREET ADDRESS  |   |               | 3.3 STREET ADDRESS           |  |           |                   |
| CITY-ST-ZIP     |   |               | 3.4. CITY-ST-ZIP             |  |           |                   |
| TITLE           |   | DELETE        | 4.1 TITLE                    |  | Change    | Addition          |
| NAME            |   |               | 4. 2 NAME                    |  |           |                   |
| STREET ADDRESS  |   |               | 4.3 STREET ADDRESS           |  |           |                   |
| CITY - ST - ZIP |   |               | 4.4 CITY - ST - ZIP          |  |           |                   |
| TITLE           |   | DELETE        | 5.1 TITLE                    |  | ☐ Change  | Addition          |
| NAME            |   |               | 5.2 NAME                     |  |           |                   |
| STREET ADDRESS  |   | I.            | 5.3 STREET ADDRESS           |  |           |                   |
| City-St-ZiP     |   |               | 5.4 CITY-ST-ZIP              |  |           |                   |
| TITLE           |   | ☐ DELETE      | 6.1 TITLE                    |  | Change    | Addition          |
| NAME            |   |               | 6.2 NAME                     |  |           |                   |
| STREET ADDRESS  |   |               | 6.3 STREET ADDRESS           |  |           |                   |
| OUTS OF THE     |   |               | 0 1 0/D/ 07 70               |  |           |                   |

14. I 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 supplemented 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 empowers to secure this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or chapted, or on an effect the report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

**FILED** 

Jan 23 1998 8:00am

Secretary of State