

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91522 032 ***150.00

DOCUMENT # P96000074838

1. Entity Name

DEAKTER HOLDINGS, INC.

Principal Place of Business

**1207 SENECA ST
JUPITER FL 33458
US**

Mailing Address

**1207 SENECA ST
JUPITER FL 33458
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0700546

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ALEXANDER, LARRY B
505 SOUTH FLAGLER DRIVE, SUITE 1100
WEST PALM BEACH FL 33401-3475**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DEAKTER, MICHAEL 1207 SENECA ST JUPITER FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD DEAKTER, PAULA J 1207 SENECA STREET JUPITER FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

CR2E034 (9/01)

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

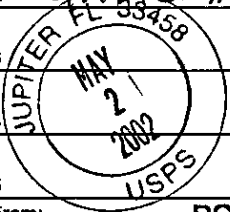
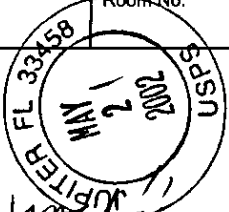
Daytime Phone #

4/29/02

561 358-7747

Attachment

#34718
#P9400007488

U. S. Postal Service ROUTING SLIP		Office or Room No.	<input type="checkbox"/> Approval <input type="checkbox"/> Signature <input type="checkbox"/> Comment <input type="checkbox"/> See Me <input type="checkbox"/> As Requested <input type="checkbox"/> Information <input type="checkbox"/> Read and Return <input type="checkbox"/> Read and File <input type="checkbox"/> Necessary Action <input type="checkbox"/> Investigate <input type="checkbox"/> Recommendation <input type="checkbox"/> Prepare Reply <input type="checkbox"/>
To:	1 Division of Corporations		
1	2 Uniform Business Report		
2	3 Filings		
3			
4			
5			
From:	POSTMASTER 1095 MILITARY TRAIL JUPITER FL 33458-9998		Phone No.
Date			Room No.
<div style="display: flex; justify-content: space-between;"> <div> <p>Remarks:</p> <p>The Postal "Contract Station" was unaware that they were not to put plastic tape over the Postal meter strip. It was the Postal Station's error. The Certified letter was was mailed on April 29, 2002 as documents indicate and then returned to customer</p> </div> <div>   </div> </div>			

Attachment

434718

U. S. Postal Service ROUTING SLIP		Office or Room No.	<input type="checkbox"/> Approval <input type="checkbox"/> Signature <input type="checkbox"/> Comment <input type="checkbox"/> See Me <input type="checkbox"/> As Requested <input type="checkbox"/> Information <input type="checkbox"/> Read and Return <input type="checkbox"/> Read and File <input type="checkbox"/> Necessary Action <input type="checkbox"/> Investigate <input type="checkbox"/> Recommendation <input type="checkbox"/> Prepare Reply <input type="checkbox"/>
To:			
1			
2			
3			
4			
5			
From:	Deakter Holdings		Phone No.
Date			Room No.

Remarks:

because of tape over meter strip. It was not the corporations fault that document was not received or stamped by May 1st.

Please Accept this letter of fault from the US Postal Service as documentation this Certified letter was mailed on April 29, 2002.

attachment 434718

U. S. Postal Service ROUTING SLIP		Office or Room No.	<input type="checkbox"/> Approval <input type="checkbox"/> Signature <input type="checkbox"/> Comment <input type="checkbox"/> See Me <input type="checkbox"/> As Requested <input type="checkbox"/> Information <input type="checkbox"/> Read and Return <input type="checkbox"/> Read and File <input type="checkbox"/> Necessary Action <input type="checkbox"/> Investigate <input type="checkbox"/> Recommendation <input type="checkbox"/> Prepare Reply <input type="checkbox"/>
To:			
1			
2			
3			
4			
5			
From:	(Decker Holdings)		Phone No.
Date			Room No.
Remarks:			
<p>Proof of mailing is included.</p> <p>Thank you for your consideration.</p> <p>Donna DeRoyster</p> <p>Donna DeRoyster</p> <p>U.S. Postal Service</p> <p>10915 Military Trail</p> <p>Jupiter, FL 33458</p>			

434718

attachment

May 1, 2002- 5:00p.m.

To whom it may concern

I mailed my corporation bill on April 29th at the post office—certified. It came back to me on May 1, too late to remail—because the postmaster put plastic on the stamp area.

I was on time to mail this—and the mail made the mistake. Please accept this a day late although you can see it was mailed on time—April 29—I do not want to pay a penalty for the mail's mistake!!!!!!

Michael 

Michael Deakter

Deakter's Holding

Attachment

434718

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only: No Insurance Coverage Provided)

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 244

7001 1140 0000 7612 4657

Sent To Division of Corporations

Street, Apt. No.,
or PO Box No. Uniform BUS of Report

City, State, ZIP+4 P.O. Box 1500 Flaming

Tallahassee, FL 32302-1500

PS Form 3800, January 2001 See Reverse for Instructions