

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000083531

FILED
Apr 03, 2009
Secretary of State

Entity Name: DEAN INTERNATIONAL INVESTMENTS CORP.

Current Principal Place of Business:

410 POINCIANA ISLAND DR.
SUNNY ISLES BEACH, FL 33160 US

New Principal Place of Business:

Current Mailing Address:

410 POINCIANA ISLAND DR.
SUNNY ISLES BEACH, FL 33160 US

New Mailing Address:

FEI Number: 65-0843626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROUSSO, MARK E
18851 NE 29TH AVE
900
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

DEANE, RICARDO
410 POINCIANA ISLAND DRIVE
SUNNY ISLES BEACH, FL 33160 US

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: RD

04/03/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTSD () Delete
Name: DEANE, RICARDO
Address: 410 POINCIANA ISLAND DR.
City-St-Zip: SUNNY ISLES BEACH, FL 33160 US

Title: VD () Delete
Name: PALADINO, JUAN D
Address: 410 POINCIANA ISLAND DR
City-St-Zip: SUNNY ISLES, FL 33160 US

Title: SEC () Delete
Name: DEANE, PATRICIO D
Address: 410 POINCIANA ISLAND DR.
City-St-Zip: SUNNY ISLE, FL 33160 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RD

PTSD

04/03/2009

Electronic Signature of Signing Officer or Director

Date