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☐ Change

(954)401-5269

Addition

DOCUMENT # P97000088038 1. Entity Name DESRON ENTERPRISES, INC.					Sep 18, 2001 8:00 am Secretary of State 09-18-2001 90015 012 ***150.00				
Principal Plac 8034 WILES RO SUITE 185 CORAL SPRING		Mailing Address 8034 WILES ROAD SUITE 185 CORAL SPRINGS FL 33067				28()) 88(2) (B(S)	> 8 514 8 8 4 8 8 111	8 1 7811 (88 1	
2. Principal Place of Business 934 N. UNIVERSITY DR Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & Stat CORAL Zip		City & State	Country	4.	FEI Number 65-078789		No	plied For t Applicable]
ゴコ	-L 33071	Zip	Country	5.	Certificate of Status Desired		8.75 Add e Required		
Name and Address of Current Registered Agent		Name	7. (Name and Address of New R	egistered Ag	ent		-	
DAN, RON 2988 NW 103RD LANE CORAL SPRINGS FL 33067		Street Ad	ddress (P.O. E	Box Number is Not Acceptable	e)		,	1	
4			City			FL	Zip Code	9	
9. This corpo	Signature, typed or printed name of registered agent a contain is eligible to satisfy its Intangible requirement and elects to do so, ria on back)	nd title if applicable. (NOTE: R	egistered Agent signatu FEE IS \$150.0 Fee will be \$5	re required when re		DATE ancing		O May Be to Fees	<u> </u>
11.	OFFICERS AND D	DIRECTORS	12.	AC	DITIONS/CHANGES TO OFF	CERS AND D	IRECTORS	IN 11]_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD DAN, RON 8034 WILES ROAD CORAL SPRINGS FL 33067	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	934 L CORAH	LUNIVERSITY SPRINGS,7	DR#	式Change (3)	☐ Addition	CR2E034 (10/00)
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	-] Change	Addition	CR2
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			[Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			[Change	Addition	
TITLE NAME STREET ADDRESS		Delete	TITLE NAME STREET ADDRESS	-] Change	☐ Addition	

CITY-ST-ZIP

STREET ADDRESS CFTY-ST-ZIP

RONALD DANS

TITLE

NAME

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 rigides 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 all other like empowered.

SIGNATURE:

Rowald DAM 09/13/01 (95%) 401-52-69

Delete

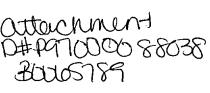
CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

TITLE



Desron Enterprises, Inc. 934 N. University Dr. Suite 135 Coral Springs, FL 33071

Thursday, September 13, 2001

Department of State Annual Report filings Division of Corporations PO. Box 6327 Tallahassee, FI 32314

To Whom it May Concern:

I hereby request a waiver of the penalties imposed for late filing of the 2001 annual report and am submitting the form and a check herewith for \$150.

I moved during the year and did not get the form until many months after it was due.

Based on the forgoing I would appreciate if you can waive the penalty.

Ron Dan, Pres.

Sincerely,