

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2008 08:00 AM
Secretary of State

DOCUMENT # P98000059133

1. Entity Name
CLUB DEAL 35, INC.



Principal Place of Business
1350 E NEWPORT CENTER
SUITE 206
DEERFIELD BEACH, FL 33442 US

Mailing Address
P.O. BOX 4219
DEERFIELD BEACH, FL 33442-4219 US



01152008 No Chg-P CR2E034 (11/05)

4. FEI Number
06-1531589

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

KAY, JAMES R
KAY LAW OFFICES
700 VILLAGE SQUARE CROSSING, STE 102B
PALM BEACH GARDENS, FL 33410

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	REIBLING, LORENZ
STREET ADDRESS	1350 E NEWPORT CENTER DR. STE 206
CITY - ST - ZIP	DEERFIELD BEACH, FL 33442
TITLE	D
NAME	REIBLING, GUENTHER
STREET ADDRESS	1350 E NEWPORT CENTER DR STE 206
CITY - ST - ZIP	DEERFIELD BEACH, FL 33442
TITLE	VPAS
NAME	KASSOF, LINDA G
STREET ADDRESS	1350 E. NEWPORT CENTER DR. STE 206
CITY - ST - ZIP	DEERFIELD BEACH, FL 33442
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

14. Feb. 2008 954 126-4585