


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 08:00 AM
Secretary of State

DOCUMENT # P99000038205

1. Entity Name
 DEKLIN INDUSTRIES, INC.



Principal Place of Business
 C/O BLAKESBERG & COMPANY, CPA'S
 951 S.W. 4TH AVENUE
 BOCA RATON, FL 33432-5803

Mailing Address
 C/O BLAKESBERG & COMPANY, CPA'S
 951 S.W. 4TH AVENUE
 BOCA RATON, FL 33432-5803

DO NOT WRITE IN THIS SPACE



03282007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0918214	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BLAKESBERG, JON D
 951 S.W. 4TH AVENUE
 BOCA RATON, FL 33432-5803

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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, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HACKNER, SEAN 1200 NW 17TH AVE #20 DELRAY BEACH, FL 33445
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 04/25/07-80021-010 150.00

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:  **SEAN HACKNER** *4/16/07* *800 630 2846*
DATE DAYTIME PHONE #