2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V38796

1. Entity Name

R.G. DEANE ENTERPRISES INC.					
Principal Place of Business	Mailing Address				
7491 CONROY RD SUITE B ORLANDO FL 32835 US	7491 CONROY SUITE B ORLANDO FL 32835 US				
2. Principal Place of Business	3. Mailing Address				
Suite, Apt. #, etc.	Suite, Apt. #, etc.				
City & State	City & State				

FILED Apr 23, 2001 8:00 am Secretary of State 04-23-2001 90224 027 ***150.00

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Principal Plac	ce of Business	3	Mailing Address							
7491 CONROY	RD		7491 CONROY							
SUITE B	20005		SUITE B							
ORLANDO FL 3 US	52635		ORLANDO FL 32835 US							
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2. Principal Place of Business		3. Mailing Address	3. Mailing Address		1 12011 Aliana 1110.	i danni dagaa danna	ann andi andi	iyayı didili bi	BIA BIBIA 1881	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE					
City & Stat	te		City & State	City & State		4. FEI Number 59-3128070			I A	pplied For
 		<u>,</u>				39-3 120070				ot Applicable
Zip		Country	Zip	Country	5.	Certificate of Stat	us Desired		8.75 Ad ee Require	
	6. Name	and Address of Current	Registered Agent			Name and Addre	ess of New Ro	egistered A	gent	
DEM				Nam	e					
7491	ne, randai I conroy i			Street Address		Box Number is No	ot Acceptable)		
SUIT Orla	'E B Ando FL 32	2835								
				City				FL	Zip Coo	de
8. The above	named entity	y submits this statement for	or the purpose of changing it	s registered offic	e or registered a	gent, or both, in th	e State of Flo	rida.	•	
SIGNATURE.								DATE		
		as asiated name of spaintered count	and title if applicable (MO		anatura required when	roinetating\				
	Signature, typed	or printed name of registered agent	r		gnature required when	reinstating)	·	DATE		
	oration is eligi	ble to satisfy its Intangible	FILE NOW	'!!! FEE IS \$1!	50.00	10. Election C		ancing)0 May Be
Tax filing r	oration is eligi			'!!! FEE IS \$1! 001 Fee will be	50.00 \$550.00	10. Election C	Campaign Fina d Contribution	ancing		00 May Be d to Fees
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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 all other like empowered.

SIGNATURE:

and SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR