

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 08, 2006 08:00 AM
Secretary of State

DOCUMENT # 184179					
1. Entity Name DASH-DOOR & CLOSER SERVICE, INC.					
Principal Place of Business 7801 NW 29TH ST MIAMI FL 33122			Mailing Address 7801 NW 29TH ST MIAMI FL 33122		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-0746464	
				Applied For Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
JEFFERY STEIHER 7801 NW 29TH ST MIAMI FL 33122				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 agree to the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	STD	☐ Delete	TITLE	☐ Change ☐ Add	
NAME	STEINER, ESTHER		NAME		
STREET ADDRESS	460 W. DILDO DRIVE		STREET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL 33139		CITY-ST-ZIP		
TITLE	P	☐ Delete	TITLE	☐ Change ☐ Add	
NAME	STEINER, JEFFREY		NAME		
STREET ADDRESS	10480 S. W. 140TH ROAD		STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33176		CITY-ST-ZIP		
TITLE	VP	☐ Delete	TITLE	☐ Change ☐ Add	
NAME	LIZASO, JUAN		NAME		
STREET ADDRESS	7801 NORTHWEST 193RD TERRACE		STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33015		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Add	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		



1st MOORE CR2E034 (10/05)

4. FEI Number **59-0746464**

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

JEFFERY STEIHER
7801 NW 29TH ST
MIAMI FL 33122

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
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9. Election Campaign Financing **\$5.00 May**
Trust Fund Contribution. ☐ **Added to Fee**

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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: _____ **02/08/06** **305-477-1164**