## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Apr 01, 2004 08:00 AM Secretary of State

DOCUMENT # 1. Entity Name DACRA POWER PLA				
Principal Place of Business		Mailing Address	!_	
1632 PENNSYLVANIA AVE MIAMI BEACH, FL 33139	US	1632 PENNSYLVANIA AVE MIAMI BEACH, FL 33139	US	



## DO NOT WRITE IN THIS SPACE

02122004 No Chg-P CR2E034 (10/03)

Applied For 4. FEI Number 65-0976465 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROBINS, CRAIG 1632 PENNSYLVANIA AVE

SIGNATURE:

## DO NOT WRITE

MIAMI BE	ACH, FL 33139		IN .	THIS SPACE	
	named entity submits this statement for the pions of registered agent.	urpose of changing its registered of	flice or registered agent, or bo	oth, in the State of Florida. I am familia	r with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title	applicable. (NOTE, Registered Age	nt signature required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Financing     Trust Fund Contribution.	\$5.00 May Be	U00000101124 	150.00
TITLE NAME STREET ADDRESS	OFFICERS AND DIRECT PD ROBINS, CRAIG 1632 PENNSYLVANIA AVE	TORS		CHORFOI DODGO GIC	
CITY-ST-ZIP	MIAMI BEACH, FL 33139 VP		Mate v ·		
NAME STREET ADDRESS CITY+ST-ZIP	GRETENSTEIN, STEVEN 1632 PENNSYLVANIA AVE MIAMI BEACH, FL 33139			<u>-</u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN .	THIS SPACE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP			a namen i na ini ini na dadahan pagapan name		
IVILE NAME STREET ADDRESS CITY - ST-ZIP					
12. I hereby of indicated	certify that the information supplied with this fill on this report or supplemental report is true a	ing does not qualify for the exemption accurate and that my signature s	on slated in Section 119.07(3) shall have the same legal effect	(i), Florida Statutes. I further certify that ct as if made under oath; that I am an o	the information officer or director

of the corporation or the receiver or trustee embow changed, or on an attachment with an address required by Chapter 607. Fiorida Statutes; and that my name appears in Block 10 or Block 11 if

Dacra Pov

Village, Inc.

SIGNATURE AND TYPED OR P OF SIGNING OFFICER OR DIRECTOR