

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 31, 2008 8:00 am
Secretary of State

03-31-2008 90037 025 ***155.00

DOCUMENT # 336506

1. Entity Name
D J FORMS COMPANY, INC.



Principal Place of Business
**6800 N AUGUSTA DR
MIAMI, FL 33015**

Mailing Address
**P.O BOX 4864
HIALEAH, FL 33014**



01092008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1277292

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

**MERRILL, GAIL S
6800 N AUGUSTA DR
MIAMI, FL 33015**

**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	PST
NAME	MERRILL, GAIL S
STREET ADDRESS	6800 N AUGUSTA DR
CITY-ST-ZIP	MIAMI, FL 33015
TITLE	VP
NAME	MERRILL, MYRON C
STREET ADDRESS	6800 N AUGUSTA DR.
CITY-ST-ZIP	MIAMI, FL 33015
TITLE	AVP
NAME	MERRILL, DAWN J
STREET ADDRESS	6800 N. AUGUSTA DRIVE
CITY-ST-ZIP	MIAMI, FL 33015
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:

Gail S. Merrill

3-7-08