

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 337534

1. Entity Name
DAR-JE, INC.

FILED

06 MAY 26 PM 3: 36

SECRETARY OF STATE
TALLAHASSEE, FLORIDAPrincipal Place of Business
3121 W HALLANDALE BEACH BLVD
STE 110
PEMBROKE PARK, FL 33009 USMailing Address
3121 W HALLANDALE BEACH BLVD
STE 110
PEMBROKE PARK, FL 33009 US

05232006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1224858Applied For
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

DVOOR, DARREN
3121 W HALLANDALE BEACH BLVD
STE 110
PEMBROKE PARK, FL 33009DO 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 renouncing)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 6, 20069. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to FeesIn accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	VD
NAME	DVOOR, SHEILA
STREET ADDRESS	3121 W HALLANDALE BEACH BLVD STE 110
CITY - ST - ZIP	PEMBROKE PARK, FL 33009
TITLE	PD
NAME	DVOOR, HENRY L
STREET ADDRESS	3121 W HALLANDALE BEACH BLVD STE 110
CITY - ST - ZIP	PEMBROKE PARK, FL 33009
TITLE	ST
NAME	DVOOR, DARREN
STREET ADDRESS	3121 W HALLANDALE BEACH BLVD STE 110
CITY - ST - ZIP	PEMBROKE PARK, FL 33009
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/23/06

Date

954-989-2448

Daytime Phone #

300076251373
06/16/06--01012--013 **150.00