


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2004 8:00 am
Secretary of State

02-09-2004 90024 034 ***150.00

DOCUMENT # 479843


1. Entity Name
 DORPHIL, INC.



Principal Place of Business Mailing Address

320 N.W. 171ST STREET 320 N.W. 171ST STREET
 NORTH MIAMI BEACH, FL 33169 US NORTH MIAMI BEACH, FL 33169 US

DO NOT WRITE IN THIS SPACE



01232004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1620951	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EPSTEIN, ABBY
 320 NW 171 ST
 MIAMI, FL 33169

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	V
NAME	KAPLAN, ELAINE
STREET ADDRESS	320 N.W. 171ST STREET
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33169
TITLE	P
NAME	EPSTEIN, ABBY
STREET ADDRESS	320 NW 171 ST
CITY-ST-ZIP	N MIAMI BCH, FL 33169
TITLE	S
NAME	KAPLAN, KERI
STREET ADDRESS	320 NW 171 ST
CITY-ST-ZIP	N MIAMI BEACH, FL 33169
TITLE	✓
NAME	SPEIDEL, MICHAEL
STREET ADDRESS	320 NW 171 ST
CITY-ST-ZIP	N MIAMI BEACH, FL 33169
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: X Abby Epstein ABBY EPSTEIN X 2/2/04 305-652-0016
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #