

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F13235

1. Entity Name

DARRYN INTERNATIONAL INC.

Principal Place of Business

3100 NW BOCA RATON BLVD.
#217
BOCA RATON FL 33431

Mailing Address

3100 NW BOCA RATON BLVD.
#217
BOCA RATON FL 33431

2. Principal Place of Business

3. Mailing Address

3421 W. Wm. Cannon Dr
Suite, Apt. #, etc.
131-126

PO Box 90788
Suite, Apt. #, etc.

City & State

Austin TX

City & State

Austin, TX

Zip

78745

Country

USA

Zip

78709

Country

USA

6. Name and Address of Current Registered Agent

KIRSCH, KARYN L.
3100 NW BOCA RATON BLVD.
#217
BOCA RATON FL 33431

4. FEI Number

59-2189674

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

Name

Joan Schwartz

Street Address (P.O. Box Number is Not Acceptable)

8642 Bella Vista

City

Boca Raton

FL

Zip Code

33433

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.

SIGNATURE

Joan Schwartz Joan Schwartz 02/05/01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE VDT
NAME KIRSCH, KARYN
STREET ADDRESS 20845 RAMITA TR.
CITY-ST-ZIP BOCA RATON FL 33433 ☐ Delete

TITLE PD
NAME LAREMORE, DARRELL
STREET ADDRESS 20845 RAMITA TR.
CITY-ST-ZIP BOCA RATON FL 33433 ☐ Delete

TITLE S
NAME KIRSCH, KARYN
STREET ADDRESS 20845 RAMITA TR.
CITY-ST-ZIP BOCA RATON FL 33433 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Kirsch-Laremore
NAME 6003 BACK BAY LANE
STREET ADDRESS AUSTIN TX 78739 ☒ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 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

Date

Daytime Phone #

FILED
Feb 13, 2001 8:00 am
Secretary of State

02-13-2001 90592 048 ***150.00

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DO NOT WRITE IN THIS SPACE

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CR2E034 (10/00)