

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000000368 (1)

1. Corporation Name

DARVA CORPORATION



Principal Place of Business

6621 SOUTHPOINT DR. NORTH, SUITE 150
JACKSONVILLE FL 32216

Mailing Address

6621 SOUTHPOINT DR. NORTH, SUITE 150
JACKSONVILLE FL 32216

2. Principal Place of Business

21 6745 PHILLIPS IND. BLVD.
Suite, Apt. #, etc.

2a. Mailing Address

26 6745 PHILLIPS IND. BLVD.
Suite, Apt. #, etc.

22 City & State

23 JACKSONVILLE, FL

24 32256 25 USA

27 City & State

28 JACKSONVILLE, FL

29 32256 30 USA

9. Name and Address of Current Registered Agent

SARVADI, GERALD S
6621 SOUTHPOINT DR. NORTH, SUITE 150
JACKSONVILLE FL 32216

3. Date Incorporated or Qualified

01/14/1993

3a. Date of Last Report

06/15/1995

4. FEI Number

76-0319488

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

GERALD S. SARVADI

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

6745 PHILLIPS IND. BLVD.

83

84 City

JACKSONVILLE

FL

85 Zip Code 32256

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Gerald S. Sarvadi

GERALD S. SARVADI

3/8/96

DATE

12. OFFICERS AND DIRECTORS

12.1	PC	☐ DELETE
NAME	SARVADI, GERALD S	
STREET ADDRESS	6621 SOUTHPOINT DR. NORTH, #150	
CITY-STATE-ZIP	JACKSONVILLE FL 32216	
12.2		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
12.3		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
12.4		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
12.5		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1	PC	☒ Change ☐ Addition
1 NAME	GERALD S. SARVADI	
13 STREET ADDRESS	6745 PHILLIPS IND. BLVD.	
14 CITY-STATE-ZIP	JACKSONVILLE, FL 32256	
2 1 TITLE		☐ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-STATE-ZIP		
3 1 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-STATE-ZIP		
4 1 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-STATE-ZIP		
5 1 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-STATE-ZIP		
6 1 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-STATE-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

Gerald S. Sarvadi GERALD S. SARVADI
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/96

Date

(904) 886-3460

Day/State/Phone #

CR2E034 (12/95)