## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachn

SIGNATURE:

## Apr 24, 2006 8:00 am Secretary of State **DOCUMENT # F95000000535** 1. Entity Name DARBY NORTHEAST, INC. 04-24-2006 90497 001 \*\*\*600.00 Mailing Address Principal Place of Business 3890 PARK CENTRAL BLVD., NORTH 300 JERICHO QUADRANGLE UUUAAUAA POMPANO BEACH, FL 33064 JERICHO, NY 11753 US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 01252006 Chg-P CR2E034 (11/05) Applied For City & State 4. FEI Number City & State 11-2589841 Not Applicable Country Zip \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 110 NORTH MAGNOLIA ST TALLAHASSEE, FL 32301 City Zip Code 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. CD TITLE ☐ Change Addition TITLE □ Delete ASHKIN, MICHAEL NAME NAME STREET ADDRESS STREET ADDRESS 3890 PARK CENTRAL BLVD NORTH CITY-ST-ZIP POMPANO BEACH, FL 33064 CITY-ST-7IP AS - 🔀 Change Addition AS □ Delete TITLE SORACI, JUSTINA NAME NAME Justina Gordon STREET ADDRESS 300 JERICHO QUADRANGLE STREET ADDRESS 300 Jericho Quadrangle CITY-ST-ZIP CITY-ST-ZIP JERICHO, NY 11753 <u>Jericho, NY 11753</u> ☐ Change ☐ Addition SD ☐ Delete TITLE TITLE KAHN, LAURA NAME 300 JERICHO QUADRANGLE STREET ADDRESS STREET ADDRESS JERICHO, NY 11753 CITY-ST-ZIP CITY-ST-ZIP [7] Change ☐ Addition ☐ Delete TITLE TITLE ASHKIN, SHEILA NAME NAME STREET ADDRESS STREET ADDRESS 3890 PARK CENTRAL BLVD NORTH POMPANO BEACH, FL 33064 CITY-ST-ZIP CITY-ST-ZIP ☐ Defete TITLE ☐ Change Addition TITLE CAPUTO, MICHAEL NAME NAME STREET ADDRESS 300 . JERICHO QUADRANGLE STREET ADDRESS CITY-ST-ZIP JERICHO, NY 11753 CITY-ST-ZIP Addition ☐ Change TITLE TITLE ☐ Delete Director ASHKIN, CARL NAME NAME Carl Ashkin STREET ADDRESS 300 JERICHO QUADRANGLE STREET ADDRESS 300 Jericho Quadrangle CITY-ST-ZIP JERICHO, NY 11753 CITY-ST-7IP Jericho, NY 11753 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 of 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 redeiver optrustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

**FILED** 

Daytime Phone #