

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2007 8:00 am
Secretary of State

04-12-2007 90046 027 ***150.00

DOCUMENT # K20660

1. Entity Name

DAHMAN REALTY, INC.



Principal Place of Business

855 SOUTH FEDERAL HWY
SUITE 212
BOCA RATON FL 33432

Address change

Mailing Address

855 SOUTH FEDERAL HWY
SUITE 212
BOCA RATON FL 33432

Address change



2. Principal Place of Business - No P.O. Box #

350 Camino Gardens Blvd.

Suite, Apt. #, etc.

Suite 301

City & State

Boca Raton, Florida

Zip

33432-5825

Country

U.S.A.

3. Mailing Address

350 Camino Gardens Blvd.

Suite, Apt. #, etc.

Suite 301

City & State

Boca Raton, Florida

Zip

33432-5825

Country

U.S.A.

1st MOORE

CR2E034 (10/06)

4. FEI Number

65-0043474

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DAHMAN, SANDRA R
855 S FEDERAL HWY
SUITE 212
BOCA RATON FL 33432

7. Name and Address of New Registered Agent

Name

Dahman, Sandra R.

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

350 Camino Gardens Blvd.

Suite 301

City

Boca Raton,

FL

Zip Code

33432-5825

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

Sandra R. Dahman President/C.E.O.

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

(NOTE: Registered Agent signature required when reinstating)

DATE

04-03-07

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	DAHMAN, SANDRA R.	
STREET ADDRESS	855 S FEDERAL HWY. STE. 212	
CITY - ST - ZIP	BOCA RATON FL 33432	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<u>Same</u>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<u>Same</u>	
STREET ADDRESS	<u>350 Camino Gardens Blvd., Ste. 301</u>	
CITY - ST - ZIP	<u>Boca Raton, Florida 33432-5825</u>	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY - ST - ZIP		

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STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Sandra R. Dahman Sandra R. Dahman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-03-07

Date

561-394-7234

Daytime Phone #