

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 30, 2006 8:00 am
Secretary of State

03-30-2006 90016 004 ***150.00

DOCUMENT # L23304

1. Entity Name
DNK MAINTENANCE, INC.



Principal Place of Business
**4001 N. OCEAN BLVD., #802-B
BOCA RATON, FL 33431**

Mailing Address
**4001 N. OCEAN BLVD., #802-B
BOCA RATON, FL 33431**

DO NOT WRITE IN THIS SPACE



01162006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0150742

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**KAGAN, HERMAN
4001 N. OCEAN BLVD.
BOCA RATON, FL 33431**

**DO NOT WRITE
IN THIS SPACE**

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 _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	KAGAN, DON
STREET ADDRESS	1407 NE 2ND AVE
CITY-ST-ZIP	DELRAY BCH, FL
TITLE	S
NAME	KAGAN, HERMAN
STREET ADDRESS	4001 N. OCEAN BLVD.
CITY-ST-ZIP	BOCA RATON, FL 33431,
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HERMAN KAGAN

3/28/06

5613927032

Date

Daytime Phone #