

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90393 043 ***150.00

DOCUMENT # M15824

1. Entity Name
DUFFY RARE VIOLINS, INC.



Principal Place of Business

~~2500 ONE AVE~~ 3300 RICE ST.
COCONUT CREEK, FL 33133

Mailing Address

~~2500 ONE AVE~~ 3300 RICE ST.
MIAMI, FL 33133

305-448-0192



01072005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2782190

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DUFFY, BARBARA L
441 PERUGIA AVE
CORAL GABLES, FL 33133

**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 registering)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PST
DUFFY, BARBARA L
441 PERUGIA AVE.
CORAL GABLES, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. 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 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

Date

Daytime Phone #

BARBARA LYNN DUFFY

(305)

4-26-05 448-0192

ATTACHMENT

14012 708
M15824

Duffy

RARE VIOLINS INC.

4-26-05

New Address:

3300 Rice St.
Unit #7
Miami, Fl.
33133

305-448-0192

Barbara Lynn Duffy

E-MAIL:
littleoso@aol.com

TELEPHONES:
(305) 443-0814
(305) 448-0192
FAX: (305) 567-1729

