

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2001 8:00 am
Secretary of State
 04-27-2001 90231 041 ****61.25

0036700

DOCUMENT # N00000004593

1. Entity Name

DDFA OF SOUTH FLORIDA, INC.

Principal Place of Business

Mailing Address

1405 S. POWERLINE RD.
 % DUNKIN' DONUTS
 POMPANO BEACH FL 33069

1405 S. POWERLINE RD.
 % DUNKIN' DONUTS
 POMPANO BEACH FL 33069

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1021702

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

ZARCO, ROBERT ESQ.
 100 S.E. 2ND. ST., STE. 2700
 MIAMI FL 33131

7. Name and Address of New Registered Agent

Name **MANOOCHER, FALLAH MOGHADDAM**

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

1405 S. POWERLINE RD

POMPANO BEACH, FL

City

FL

Zip Code

33069

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.

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 \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
 NAME **MOGHADDAM, MANOOCHER**
 STREET ADDRESS **1405 S. POWERLINE RD.**
 CITY-ST-ZIP **POMPANO BEACH FL 33069**

TITLE **VD** ☐ Delete
 NAME **SANTOS, MARIANO**
 STREET ADDRESS **18714 N.W. 67TH AVE.**
 CITY-ST-ZIP **MIAMI FL 33015**

TITLE **SD** ☐ Delete
 NAME **SUCHEKI, HELENA**
 STREET ADDRESS **825 W. HLLANDALE BEACH BLVD.**
 CITY-ST-ZIP **HALLENDALE FL 33009**

TITLE **TD** ☐ Delete
 NAME **SENRA, OCTAVIO**
 STREET ADDRESS **6190 MIRAMAR PKWY.**
 CITY-ST-ZIP **MIRAMAR FL 33023**

TITLE **D** ☐ Delete
 NAME **BASHIR, AL**
 STREET ADDRESS **12054 S.W. 117 TERR.**
 CITY-ST-ZIP **MIAMI FL 33186**

TITLE **D** ☐ Delete
 NAME **MANZER, MASOUD**
 STREET ADDRESS **15841 S.W. 56 STREET**
 CITY-ST-ZIP **DAVIE FL 33331**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☒ Change ☐ Addition
 NAME **MANOOCHER, FALLAH MOGHADDAM**
 STREET ADDRESS **1405 S. POWERLINE RD**
 CITY-ST-ZIP **POMPANO BEACH, FL 33069**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 617, 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:

MANOOCHER, FALLAH MOGHADDAM, MANOOCHER

4/15/01

954 295-6252

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)