


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 02, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N99000004550</b>	
1. Entity Name <b>G &amp; G DAREHSHORI FOUNDATION, INC.</b>	

Principal Place of Business <b>979 EAST GULF DRIVE UNIT 514 SANIBEL, FL 33957</b>	Mailing Address <b>2402 PALM RIDGE ROAD PMB 155 SANIBEL, FL 33957</b>
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07152004 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-0937170</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>STERN, JERROLD S 695 TARPON BAY ROAD #2 SANIBEL, FL 33957</b>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$61.25  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

U000000169222  
08/02/04-80015-019 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD DAREHSHORI, GEORGIA 2402 PALM RIDGE ROAD, #155 SANIBEL, FL 33957
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAREHSHORI, GHOLI 2402 PALM RIDGE ROAD, #155 SANIBEL, FL 33957
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAREHSHORI, SARA 429 GREENWICH ST PH NEW YORK, NY 10013
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROLFE, RONALD 429 GREENWICH ST PH NEW YORK, NY 10013
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:** *X. George Darehshori* **7/24/04** **Date** \_\_\_\_\_ **Daytime Phone #** \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR