2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000078967

1. Entity Name

D & T PROPERTIES OF SOUTH FLORIDA INC.



Principal Place of Business

Mailing Address

D & T PROPERTIES OF SOUTH FLORIDA 8324 S LAKE FOREST DR DAVIE, FL 33328 8324 S LAKE FOREST DR DAVIE, FL 33328 FILED Feb 15, 2006 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

 01052006
 No Chg-P
 CR2E034 (11/05)

 4. FEI Number 65-1130405
 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Regulred

Daytma Ptvara &

6. Name and Address of Current Registered Agent

SIGNATURE: Den't Joseph OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TALPOS, DUMITRU 8324 S LAKE FOREST DR DAVIE, FL 33328

DO NOT WRITE IN THIS SPACE

UAVIE, FL	. 33320			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			Agent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Financ Trust Fund Contribution.	aing 🔲	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TALPOS, DUMITRU 8324 S LAKE FOREST DR DAVIE, FL 33328	·			
TIFLE NAME STREET ADDRESS CITY-ST-ZIP					HADOTOA435880 02/25/06-80024-019 150.08
HITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE MAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ABORESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filling 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.					