

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000047369

FILED  
Mar 30, 2009  
Secretary of State

Entity Name: DARIUS INVESTMENT ENTERPRISES, INC.

**Current Principal Place of Business:**

1055 ELEANOR CT  
DELTONA, FL 32725

**New Principal Place of Business:**

**Current Mailing Address:**

1055 ELEANOR CT  
DELTONA, FL 32725

**New Mailing Address:**

FEI Number: 47-0860105

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DARCH, MICHAEL  
1055 ELEANOR CT  
DELTONA, FL 32725 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: DARCH, MICHAEL P  
Address: 1055 ELEANOR COURT  
City-St-Zip: DELTONA, FL 32725

Title: V ( ) Delete  
Name: DARCH, DONNA W  
Address: 1055 ELEANOR COURT  
City-St-Zip: DELTONA, FL 32725

Title: S ( ) Delete  
Name: MERCKX, DEWAYNE  
Address: 11816 HAKES DRIVE  
City-St-Zip: MISHAWAKA, IN 46545

Title: D ( ) Delete  
Name: LEITER, NICOLE  
Address: 3823 CHATTAHOOCHEE SUMMIT DRIVE  
City-St-Zip: ATLANTA, GA 30339

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: DARCH, MICHAEL C  
Address: 1065 EAST GAUCHO CIRCLE  
City-St-Zip: DELTONA, FL 32725

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: M. P. DARCH

PD

03/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date