## 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Feb 04, 2004 08:00 AM DOCUMENT # P02000069995 **Secretary of State** 1. Entity Name DAVID'S DEN, INC. Principal Place of Business Mailing Address 1321 SW 1ST AVE FT LAUDERDALE FL 1321 SW 1ST AVE FT LAUDERDALE FL 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State City & State 4. FEI Number Applied For NO-T APPLICABLE Not Applicable Ζıp Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name D'ONOFRIO, DAVID L Street Address (P.O. Box Number is Not Acceptable) 1321 SW 1ST AVE FT LAUDERDALE FL City Zip Code B. 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, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 \$5.00 May 8e 9. Election Campaign Financing After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE DPST Change Delete TITLE U00000036720 Change 02/06/04-80069-019 150.00 D'ONOFRIO, DAVID L NAME NAME STREET ADDRESS 1321 SW 1ST AVE STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete BRE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CETY - ST - 789 CITY-ST-ZIP TITLE ☐ Delete BBF ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete BTEE ☐ Change ☐ Addition MANSE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete BIRE Change ☐ Addition NAME NAME STREET ADDRESS STREET AUDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Defete 3373 F Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - \$7 - 71P CITY-ST-ZIP

**FILED** 

12. Thereby certify that the information supplied with this filling 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.

GIGNATURE: 2 ach L 20 ml Pren David ( D'Ono Fru 2/2/04 523-5663