

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2007 08:00
Secretary of State

DOCUMENT # P02000103657

1. Entity Name
DAYTONA LEATHER PARK, INC.



Principal Place of Business

**701 S ATLANTIC AVE UNIT 413
DAYTONA BCH, FL 32118**

Mailing Address

**701 S ATLANTIC AVE UNIT 413
DAYTONA BCH, FL 32118**



04302007

No Chg-P

CR2E034 (11/05)

4. FEI Number
52-2382762

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

8. Name and Address of Current Registered Agent

**TIVOLI, SALOMON
701 S ATLANTIC AVE UNIT 413
DAYTONA BCH, FL 32118**

**DO NOT WRITE
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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**U00000754244
05/22/07-80053-015 150.00**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	TIVOLI, SALOMON
STREET ADDRESS	701 S ATLANTIC AVE UNIT 413
CITY-ST-ZIP	DAYTONA BCH, FL 32118
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE:

[Signature] **SALOMON TIVOLI** 04/30/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #