

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000017854

Entity Name: DARCIS, INC

FILED
Mar 11, 2008
Secretary of State

Current Principal Place of Business:

6027 S HILLTOP RD
HOMOSASSA, FL 34446

New Principal Place of Business:

Current Mailing Address:

PO BOX 3671
HOMOSASSA SPRINGS, FL 34447

New Mailing Address:

FEI Number: 58-0964794

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROMERO, DEBORAH A
6027 S HILLTOP RD
HOMOSASSA, FL 34446 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: MS () Delete
Name: ROMERO, DEBORAH A
Address: 6027 S HILLTOP RD
City-St-Zip: HOMOSASSA SPRINGS, FL 34447

Title: VP () Delete
Name: SOSA, CARLOS I
Address: PO BOX 3671
City-St-Zip: HOMOSASSA SPRINGS, FL 34447

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: ROMERO, DEBORAH A
Address: 6027 S HILLTOP RD
City-St-Zip: HOMOSASSA SPRINGS, FL 34447

Title: P (X) Change () Addition
Name: SOSA, CARLOS I
Address: PO BOX 3671
City-St-Zip: HOMOSASSA SPRINGS, FL 34447

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: CARLOS I SOSA

P

03/11/2008

Electronic Signature of Signing Officer or Director

Date