

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90461 001 ***600.00

DOCUMENT # P03000103338

1. Entity Name
DORISMAR ENTERPRISES, INC.



Principal Place of Business
**3801 SOUTH OCEAN DR. SUITE 4Y
HOLLYWOOD, FL 33019**

Mailing Address
**3801 SOUTH OCEAN DR. SUITE 4Y
HOLLYWOOD, FL 33019**

66417365



2. Principal Place of Business
17330 N.W. 67TH PLACE

3. Mailing Address
C/O J A D & COMPANY, P.A.

Suite, Apt. #, etc.
UNIT C

Suite, Apt. #, etc.
3400 CORAL WAY, 6TH FL.

04272004 Chg-P CR2E034 (10/03)

City & State
HIALEAH, FLORIDA

City & State
MIAMI, FLORIDA

4. FEI Number
20-0248275

Applied For
Not Applicable

Zip
33015

Country
U.S.A.

Zip
33145-3053

Country
U.S.A.

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SCHIFF, RICARDO
3801 SOUTH OCEAN DR. SUITE 4Y
HOLLYWOOD, FL 33019**

7. Name and Address of New Registered Agent

Name
JORGE ANDRES DIAZ, C.P.A.
Street Address (P.O. Box Number is Not Acceptable)
3400 CORAL WAY, 6TH FL.

City **MIAMI,** FL Zip Code **33145-3053**

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 J.A. Diaz / **JORGE ANDRES DIAZ** 04/30/04
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, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **SCHIFF, RICARDO A**
STREET ADDRESS **3801 SOUTH OCEAN DR. SUITE 4Y**
CITY-ST-ZIP **HOLLYWOOD, FL 33019**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P/D** ☒ Change ☐ Addition
NAME **SCHIFF, RICARDO A.**
STREET ADDRESS **17330 NORTHWEST 67TH PLACE, UNIT C**
CITY-ST-ZIP **HIALEAH, FLORIDA 33015**

TITLE ☐ Change ☒ Addition
NAME **V/D KERCHEN, DORA NOEMI**
STREET ADDRESS **17330 NORTHWEST 67TH PLACE, UNIT C**
CITY-ST-ZIP **HIALEAH, FLORIDA 33015**

TITLE ☐ Change ☒ Addition
NAME **S/D DIAZ, JORGE ANDRES**
STREET ADDRESS **3400-CORAL WAY, STE. 601**
CITY-ST-ZIP **MIAMI, FLORIDA 33145-3053**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

SIGNATURE: J.A. Diaz / **JORGE ANDRES DIAZ** 04/30/04 (786) 306-3099
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #