2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2005 8:00 am
Secretary of State
04-08-2005 90031 011 ***150.00

DOCUMENT # P03000105415

1. Entity Name
DYG, INC.

Principal Place of Business
3255 NE 184TH STREET
12-407
AVENTURA, FL 33160

Mailing Address
3255 NE 184TH STREET
12-407
AVENTURA, FL 33160

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

03292005 Chg-P CR2E034 (10/03)

4. FEI Number: 20-0250086 | Applied For | Not Applicable

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

6. Name and Address of Current Registered Agent

MOYAL ACCOUNTING SERVICES, INC.
208 N. UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024

7. Name and Address of New Registered Agent

Name: GC BUSINESS SOLUTIONS
Street Address (P.O. Box Number is Not Acceptable): 7601 E. TREASURE DRIVE # 810
City: NORTH BAY VILLAGE FL Zip Code: 33141

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] JEAN DAVID GANEM PRESIDENT DATE: 03/30/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	GANEM, DEBORAH	
STREET ADDRESS	3255 NE 184TH STREET, #12-407	
CITY-ST-ZIP	AVENTURA, FL 33160	
TITLE	VP	☑ Delete
NAME	GANEM, JEAN-DAVID	
STREET ADDRESS	3255 NE 184TH STREET, #12-407	
CITY-ST-ZIP	AVENTURA, FL 33160	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
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	☑ Change ☐ Addition
NAME	HADJAJE, DEBORAH	
STREET ADDRESS	3255 NE 184th STREET, # 12-407	
CITY-ST-ZIP	AVENTURA FL 33160	
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		
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: [signature] DEBORAH HADJAJE 03-29-05 786-486-1817
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone #