

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000135138

FILED
Apr 30, 2006
Secretary of State

Entity Name: DARIUS EVANS ENTERPRISES INC

Current Principal Place of Business:

3032 SAGEBLOOM TERRACE
NORTH PORT, FL 34286

New Principal Place of Business:

Current Mailing Address:

3032 SAGEBLOOM TERRACE
NORTH PORT, FL 34286

New Mailing Address:

FEI Number: 56-2415515

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EVANS, DARIUS L
3032 SAGEBLOOM TERRACE
NORTH PORT, FL 34286 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: P () Delete
Name: EVANS, DARIUS L
Address: 3032 SAGEBLOOM TERRACE
City-St-Zip: NORTH PORT, FL 34286 US

Title: VP () Delete
Name: EVANS, DOYLE A
Address: 508 ORANGE BLOSSOM LANE
City-St-Zip: NOKOMIS, FL 34275 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: EVANS, DOYLE A
Address: 6233 TANEYTOWN LANE
City-St-Zip: NORTH PORT, FL 34286 US

I hereby certify that the information supplied with this filing does not qualify for the 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: DARIUS EVANS

PR

04/30/2006

Electronic Signature of Signing Officer or Director

Date