

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2005 8:00 am
Secretary of State

01-12-2005 90007 046 ***158.75

DOCUMENT # P04000103594

1. Entity Name
DURAN INVESTORS & PROPERTIES, INC.



Principal Place of Business
**11264 NW 14TH COURT
PEMBROKE PINES, FL 33026**

Mailing Address
**11264 NW 14TH COURT
PEMBROKE PINES, FL 33026**

50001855

2. Principal Place of Business

3. Mailing Address

320 S. Flamingo Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#316

01072005

Chg-P

CR2E034 (10/03)

City & State

City & State

Pembroke Pines, FL

4. FEI Number

41-2144280

Applied For

Not Applicable

Zip

Country

Zip

33027

Country

Broward

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DURAN, ANDREA L
11264 NW 14TH COURT
PEMBROKE PINES, FL 33026**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

☐

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PTD
DURAN, DASIEL
11264 NW 14TH COURT
PEMBROKE PINES, FL 33026**

☐ Delete

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

TITLE
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CITY-ST-ZIP
**VS
DURAN, ANDREA L
11264 NW 14TH COURT
PEMBROKE PINES, FL 33026**

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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:

Andrea L. Duran, Vice President, 1/7/05 (786) 512-6381

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #