

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 21, 2007 8:00 am
Secretary of State

02-19-2007 90054 010 ***150.00

DOCUMENT # P06000114430 1. Entity Name DOLPHIN DE AUBERET, INC.					
Principal Place of Business 10773 58TH ST. SUITE 520 MIAMI FL 33178			Mailing Address 10773 58TH ST. SUITE 520 MIAMI FL 33178		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 20-5455234	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent ROBERTSON, MICHAEL 10773 58TH ST. SUITE 520 MIAMI FL 33178			7. Name and Address of New Registered Agent 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: <u><i>Michael Robertson</i></u> DATE: <u>2-2-07</u> Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registering)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			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	D ROBERTSON, MICHAEL ☐ Delete 10773 58TH ST. MIAMI FL 33178		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: <u><i>Michael Robertson</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date: <u>2-2-07</u> Daytime Phone #: <u>734-420-6028</u>		

ATTACHMENT

66006078
P06000114430

© 2005 INTUIT INC. # 542 1-800-433-3310

DOLPHIN DE AUBERET, INC. 10/06
10773 NW 58TH STREET
SUITE 520
MIAMI, FL 33178

BANK OF AMERICA, NA
2680 NW 107th Ave.
Doral, FL 33172
63-4/630

PAY TO THE ORDER OF Division of Corporations

One and 00/100 DOLLARS

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

MEMO P06000114430

Just for address 315/2807 1073

\$ 24.00

VOID