

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000031663

Entity Name: DMP BROKERS, INC.

**FILED**  
**Mar 17, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4700 NW BOCA RATON BLVD  
SUITE 301  
BOCA RATON, FL 33432

**New Principal Place of Business:**

**Current Mailing Address:**

715 FOXPOINTE CIRCLE  
DELRAY BEACH, FL 33445

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PRAKAS, CHARLES C  
4700 NW BOCA RATON BLVD  
SUITE 301  
BOCA RATON, FL 33432 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: PRAKAS, DONNA M  
Address: 715 FOXPOINTE CIRCLE  
City-St-Zip: DELRAY BEACH, FL 33445

Title: VP  
Name: PRAKAS, DONNA M  
Address: 715 FOXPOINTE CIRCLE  
City-St-Zip: DELRAY BEACH, FL 33445

Title: SECY  
Name: PRAKAS, DONNA M  
Address: 715 FOXPOINTE CIRCLE  
City-St-Zip: DELRAY BEACH, FL 33445

Title: P  
Name: PRAKAS, CHARLES C  
Address: 715 FOXPOINTE CIRCLE  
City-St-Zip: DELRAY BEACH, FL 33445

I hereby 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 all other like empowered.

SIGNATURE: D PRAKAS

PRES

03/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date