## 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Feb 08, 2006 8:00 am **Secretary of State** DOCUMENT # P94000086022 02-08-2006 90017 004 \*\*\*150.00 DOVA INTERNATIONAL, INC. Principal Place of Business Mailing Address 7700 TRAPAMI LANE 7700 TRAPAMI LANE **BOYNTON BEACH FL 33437 BOYNTON BEACH FL 33437** 2. Principal Place of Business 3. Mailing Address 1700 Trapani 7700 Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State Applied For City & State 4. FEI Number 65-0545646 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION INFORMATION SERVICES INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS ST. TALLAHASSEE FL 32301 Zip Code City FI 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) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Delete TITLE Change Addition DIANE COERTE CORRERI, DIANE NAME NAME 7700 Trapane STREET ADDRESS 720 NE 77TH ST STREET ADDRESS CITY-ST-ZtP CHTY-ST-ZIP **BOCA RATON FL** VΡ ☐ Delete TITLE TITLE ☐ Addition Juhn Correr CORRERI, JOHN NAME NAME 1700 Trapani STREET ADDRESS 720 NE 77TH ST STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL** CITY-ST-ZIP ☐ Detete NAME CORRIRI, DIANE NAME DIANG CORRER STREET ADDRESS STREET ADDRESS 7700 TRAPAMI LANE CITY-SI-ZIP CITY-ST-ZIP TOPYTON FL 83437 ☐ Delete TITLE TITLE CORRERI, JOHN NAME NAME STREET ADDRESS 7700 TRAPANI LANE STREET ADDRESS CITY-ST-ZIP **BOYNTON BEACH FL 33437** CITY-ST-ZIP Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-7IP CITY-ST-7IP TETCE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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:

FILED