

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 27, 1999 8:00 am  
Secretary of State

02-27-1999 90020 035 \*\*\*150.00

DOCUMENT # P95000007398

1. Corporation Name  
DARLMAR, INC.

Principal Place of Business  
11595 SW 149TH COURT  
MIAMI FL 33196

Mailing Address  
11595 SW 149TH COURT  
MIAMI FL 33196

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
01/27/1995

4. FEI Number  
65-0576270

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 4505 SW 75 AVENUE

Suite, Apt. #, etc.

22 City & State  
MIAMI FLORIDA

23 Zip 33155 Country DAE

24

2a. Mailing Address

26 16440 SW 95 STREET

Suite, Apt. #, etc.

27 City & State  
MIAMI FLORIDA

28 Zip 33196 Country DAE

29 30

9. Name and Address of Current Registered Agent

MARTINEZ, JORGE  
11595 SW 149TH COURT  
MIAMI FL 33196

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)  
16440 SW 95 STREET

83

84 City  
MIAMI

FL

85 Zip Code  
33196

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

JORGE MARTINEZ, DIRECTOR

1-26-99

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME MARTINEZ, JORGE  
STREET ADDRESS 11595 SW 149TH COURT  
CITY-ST-ZIP MIAMI FL 33196

TITLE D  
NAME MARTINEZ, DARLAINE  
STREET ADDRESS 11595 SW 149TH COURT  
CITY-ST-ZIP MIAMI FL 33196

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS 16440 SW 95 STREET  
1.4 CITY-ST-ZIP MIAMI FLORIDA 33196

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS 16440 SW 95 STREET  
2.4 CITY-ST-ZIP MIAMI FLORIDA 33196

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JORGE MARTINEZ

Date

Daytime Phone #

1/26/99 305-265-7788

CR2E034 (1/98)

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