

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 05, 2007 8:00 am
Secretary of State

03-05-2007 90069 038 ***150.00

DOCUMENT # P95000023012

1. Entity Name

DIMARSI, INC.



Principal Place of Business

17 S ATLANTIC BLVD
#R 120
FT LAUDERDALE FL 33316
US

Mailing Address

17 S ATLANTIC BLVD
#R 120
FT LAUDERDALE FL 33316
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/06)

4. FEI Number 65-0573237

Applied For
Not Applicable

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

D'ERRICO, SILVIA A
103 ROYAL PARK DR.
CONDO # 2-D
OAKLAND PARK FL 33309

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, 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 D ☐ Delete
NAME D'ERRICO MARCELLO JR.
STREET ADDRESS 1905 N ATLANTIC BLVD, # 4-A
CITY-ST-ZIP FORT LAUDERDALE FL 33305

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

TITLE D ☐ Delete
NAME D'ERRICO DINO
STREET ADDRESS 3132 S UNIVERSITY DR
CITY-ST-ZIP DAVIE FL 33328

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

TITLE D ☐ Delete
NAME DERRICO, SILVIA A
STREET ADDRESS 103 ROYAL PARK DR 2 D
CITY-ST-ZIP OAKLAND PARK FL 33309

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 4091 NW 91 TERRACE
CITY-ST-ZIP SUNRISE, FL 33351

TITLE D ☒ Delete
NAME D'ERRICO, MARCEZ P
STREET ADDRESS 1905 N ATLANTIC BLVD, # 4-A
CITY-ST-ZIP FORT LAUDERDALE FL 33305

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

TITLE PD ☐ Delete
NAME D'ERRICO, STEFANIA R
STREET ADDRESS 1905 N ATLANTIC BLVD, # 4-A
CITY-ST-ZIP FORT LAUDERDALE FL 33305

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Stefania R. D'Errico Feb 10-07 954-564-4886