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FILED
Apr 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000078426 (0)

1. Corporation Name

DARI MACHINING, INC.

Principal Place of Business

431 NE 26TH CT
POMPANO BEACH FL 33084

Mailing Address

431 NE 26TH CT
POMPANO BEACH FL 33084-5426



2. Principal Place of Business

21 641 NE 26TH CT

2a. Mailing Address

26 641 NE 26TH CT

Suite, Apt. #, etc.

22 BAY A

Suite, Apt. #, etc.

27 BAY A

City & State

23 POMPANO BEACH FL

City & State

28 POMPANO BEACH FL

Zip

24 33064

Country

25 BROWARD

Zip

29 33064

Country

30 BROWARD

9. Name and Address of Current Registered Agent

BOSCH ACCOUNTING AND TAX SERVICES CORP
5440 N STATE ROAD 7, SUITE #8
FT LAUDERDALE FL 33319

3. Date Incorporated or Qualified

10/09/1995

3a. Date of Last Report

05/01/1996

4. FEI Number

65-0608617

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☒

Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

BOSCH ACCOUNTING AND TAX SERVICES CO.
5440 N STATE ROAD 7, SUITE #5

82

Street Address (P.O. Box Number is Not Acceptable)

83

City

FT LAUDERDALE

FL

85 Zip Code

33319

11. Pursuant to the provisions of Sections 607.0505 and 607.0508, 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

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

(NOTE: Registered Agent's signature required when reinstating)

04/18/97

12. OFFICERS AND DIRECTORS

TITLE PT ☐ DELETE

NAME CABRERA, JOSE R
STREET ADDRESS 1465 NW 126TH TERR
CITY-ST-ZIP SUNRISE FL 33323

TITLE VS ☒ DELETE

NAME OSORIO, SOFIA C
STREET ADDRESS 11565 NW 41ST ST
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PT ☒ Change ☐ Addition

1.2 NAME CABRERA, JOSE R
1.3 STREET ADDRESS 354 MAILARD ROAD
1.4 CITY-ST-ZIP WESTON FL 33327

2.1 TITLE VS ☐ Change ☒ Addition

2.2 NAME CABRERA, M. WILMA
2.3 STREET ADDRESS 354 MAILARD ROAD
2.4 CITY-ST-ZIP WESTON FL 33327

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 amendment with an address.

SIGNATURE

04/17/97

(9/96) 943-9875

CR2E034 (9/96)