

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000018019
1. Corporation Name

D A R ENTERPRISES OF SO. FL., INC.

Principal Place of Business Mailing Address
10040 N.W. 53 STREET **10040 N.W. 53 STREET**
SUNRISE, FL. 33351 **SUNRISE, FL. 33351**

3. Date Incorporated or Qualified **02/26/96** 3a. Date of Last Report

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

4. FEI Number **65-0648762** 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

9. Name and Address of Current Registered Agent

DAVID ROTHMAN
10040 N.W. 53RD STREET
SUNRISE, FL. 33351

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 *[Signature]* DATE **10/3/97**
Signature, typed or printed name of registered agent and, if applicable, (NOT) Registered Agent signature required when reinstating

12. OFFICERS AND DIRECTORS

TITLE	PSD	<input type="checkbox"/> DELETE
NAME	DAVID ROTHMAN	
STREET ADDRESS	10040 N.W. 53RD STREET	
CITY-ST-ZIP	SUNRISE, FL. 33351	<input type="checkbox"/> DELETE
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		<input type="checkbox"/> DELETE
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		<input type="checkbox"/> DELETE
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	800002317828--0
14 CITY-ST-ZIP	-10/10/97--01100--005
21 TITLE	****165.00 ****165.00
22 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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 attachment with an address.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **10/3/97** Daytime Phone #

CR2E034 (9/96)

②

D A R ENTERPRISES OF SO. FL., INC.
10040 N. W. 53RD STREET, SUNRISE, FL. 33351

SEPTEMBER 30, 1997

FLORIDA DEPT. OF STATE
DIVISION OF CORPORATIONS
P. O. BOX 6327
TALLAHASSEE, FLORIDA 32314

ATTENTION: TREVOR BRUMBLEY
DOCUMENT SPECIALIST

REFERENCE: CORPORATE ANNUAL REPORT 1997
YOUR LETTER NUMBER: 697A00047053

ATTACHED HERETO, PLEASE FIND THE CORPORATE ANNUAL REPORT FOR 1997, MY CHECK #1991 MADE PAYABLE TO THE "FLORIDA STATE DEPT. OF CORPORATIONS" IN THE AMOUNT OF \$165.00 AND A COPY OF THE AFOREMENTIONED LETTER FROM THE FLORIDA DEPT. OF STATE DATED SEPT. 23, 1997.

PLEASE BE ADVISED THAT WE DID NOT RECEIVE THE CORPORATE ANNUAL REPORT FORM OR REMINDER NOTICE. WE WERE ADVISED TO INFORM YOU OF SAME.

PLEASE REINSTATE THIS CORPORATION TO ITS ACTIVE STATUS AS SOON AS POSSIBLE. THANKING YOU IN ADVANCE, I REMAIN,

SINCERELY YOURS,


DAVID ROTHMAN
PRESIDENT

DR/B

ENCS.