2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000096618

1. Entity Name DAVID & SAUL, INC.



FILED Feb 25, 2008 08:00 Al Secretary of State

Principal Place of Business

9541 HARDING AVE SURFSIDE, FL 33154 Mailing Address

9541 HARDING AVE SURFSIDE, FL 33154



01302008 No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0709123

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WINTRUB, SAUL C 9541 HARDING AVE SURFSIDE, FL 33154

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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|--|---|-------------------------------|------------------------------------|--|--------------------|
| The above named entity submits this statement for the the obligations of registered agent. | purpose of changing its registered of | office or re | egistered agent, or bo | oth, in the State of Florida. I am familia | r with, and accept |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent and title if ap | | | ra required when reinstating) DATE | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 | Election Campaign Financin Trust Fund Contribution. | ng 🔲 | \$5.00 May Be Added to Fees | U00000838532 03/05/08-80032-018 1 | l50.00 |
| 10. OFFICERS AND DIRE | CTORS | | | | |
| ITILE DP NAME SHAKURY, AHARON STREET ADDRESS 9541 HARDING AVE CITY-ST-ZIP SURFSIDE, FL 33154 | | | | | |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR