2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000095703

1. Entity Name
DARCAR ENTERPRISES, INC.



FILED Jan 18, 2008 08:00 AM Secretary of State

Principal Place of Business

1311 S. MILITARY TRAIL WEST PALM BEACH, FL 33415 Mailing Address

1311 S. MILITARY TRAIL WEST PALM BEACH, FL 33415



DO NOT WRITE IN THIS SPACE

01142008 No Chg-P CR2E034 (11/05)

Applied For

4. FEI Number 30-0122448

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BRYAN, CHARLES 1311 S. MILITARY TRAIL WEST PALM BEACH, FL 33415

DO NOT WRITE IN THIS SPACE

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	e named entity submits this statement for the p tions of registered agent.	urpose of changing its registe	red office or r	egistered agent, or bo	th, in the State of Fforida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if	applicable (NOTE: Register	ed Agent signature	a required when reinstaling)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees			
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CHY-ST-ZIP	PD BRYAN, CHARLES 15663 CYPRESS PARK DRIVE WELLINGTON, FL 33414				U00000789580 01/22/08-80031-009 159.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP					01,22,00 00001 000 111
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12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 19, Florida Statutes. I further certify that the information indicated on this report or supplied ental 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 received 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:

STREET ADDRESS CITY-ST-ZIP

NATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECT

Charles Bryan

1/15-108

561-433-599

Daytime Phone #