

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2001 8:00 am
Secretary of State

04-11-2001 90068 023 ***150.00

0147800

DOCUMENT # P98000099684

1. Entity Name

DARPER CORPORATION

Principal Place of Business

**2333 BRICKELL AVENUE
 MEZZANINE SUITE
 MIAMI FL 33129**

Mailing Address

**2333 BRICKELL AVENUE
 MEZZANINE SUITE
 MIAMI FL 33129**

2. Principal Place of Business

1608 BANYAN WAY

3. Mailing Address

PO BOX 267144

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

WESTON FL

City & State

WESTON FL

4. FEI Number

65-0911154

Applied For

Not Applicable

Zip

33327

Country

BROWARD

Zip

33326

Country

BROWARD

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**RODRIGUEZ, MIGDALIA
 2333 BRICKELL AVENUE
 MEZZANINE SUITE
 MIAMI FL 33129**

7. Name and Address of New Registered Agent

Name **DARIO PERDOMO**

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

1608 BANYAN WAY

City

WESTON

FL

Zip Code

33327

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.

SIGNATURE

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

DARIO PERDOMO, PRESIDENT

04-09-01

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	PERDOMO, DARIO	
STREET ADDRESS	P.O. BOX 267144	
CITY-ST-ZIP	WESTON FL 33326	
TITLE	V	<input type="checkbox"/> Delete
NAME	PERDOMO, LEONOR A	
STREET ADDRESS	1608 BANYAN WAY	
CITY-ST-ZIP	WESTON FL 33327	
TITLE		<input type="checkbox"/> Delete
NAME		
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other the empowered.

SIGNATURE:

Dario Perdomo
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DARIO PERDOMO, PRESIDENT

04-09-01

Date

Daytime Phone #

CR2E034 (10/00)