

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000104629

1. Entity Name
DIRAH HOLDINGS, INC.



Principal Place of Business
C/O APPLEBAUM
4101 PINE TREE DR 1122
MIAMI BEACH, FL 33140-3616

Mailing Address
C/O APPLEBAUM
323 OGDEN AVE
TEANECK, NJ 07666

FILED
Mar 15, 2007 08:00 AM
Secretary of State



03052007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0992159

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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 CITY-ST-ZIP	PD FARKAS, PAIGE 314 OGDEN AVENUE TEANECK, NJ 07666
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD APPLEBAUM, ERIC 323 OGDEN AVENUE TEANECK, NJ 07666
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD APPLEBAUM, JASON 80-83 GREENFELL ST. KEW GARDENS, NY 11415
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000667237
03/26/07-80020-013 150.00

**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/07

917/923-7171