## 2007 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # V02608 1. Entity Name D.R.K. OF BROWARD COUNTY, INC. Principal Place of Business P.O. BOX 6580 HOLLYWOOD, FL 33081 Mailing Address P.O. BOX 6580 HOLLYWOOD, FL 33081 DO NOT WRITE IN THIS SPACE 4. FEI Number 65-0303801 6. Name and Address of Current Registered Agent PEENNIGER DORIS A

FILED Mar 13, 2007 08:00 AM Secretary of State

CR2E034 (11/05)

Applied For



No Chg-P

				33 333	<del></del>	58.75 Additional
				5. Certificate	of Status Desired	Fee Required
6. Name and Address of Current Registered Agent						
4613 SW 3	ER, DORIS A 37TH AVENUE ERDALE, FL 33312	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 Signature, typed or printed name of registered agent and title if applicable.  (NOTE: Registered Agent signature required when reinstating)  Date						
FILE NOWILL FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Finan Trust Fund Contribution.				5.00 May Be Ided to Fees		
10.	OFFICERS AND DIREC	CTORS	I			
NAME STREET ADDRESS CITY-ST-ZIP	P PFENNIGER, DORIS A 4613 S.W. 37TH AVE. FT. LAUDERDALE, FL 33312				U000006 03/22/07-8	64689 0056-006 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PFENNIGER, RICHARD C 4613 S.W. 37TH AVE. FT. LAUDERDALE, FL 33312				1 <b>/00/</b> 000 <b>6</b> 03/16/07 <b>(</b> 8)	60 <u>09</u> 6 0032-006) 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SP	ACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS						

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: 🔏