## 2006 FOR PROFIT CORPORATION

## **ANNUAL REPORT**

DOCUMENT # V70182

1. Entity Name THE DARVISH COLLECTION, INC.

Principal Place of Business

1199 3RD STREET SOUTH NAPLES, FL 34102 US Mailing Address

1199 3RD STREET SOUTH NAPLES, FL 34102

## **FILED** Feb 23, 2006 08:00 AM Secretary of State



02022006

No Cha-P

CR2E034 (11/05)

4. FEI Number 65-0361973

Applied Far Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

CASEMENT, ANDREAS 700 FOUNTAINHEAD LANE NAPLES, FL 34103

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pilons of registered agent.	urpose of changing its registered	office or	registered agent, or bo	th, in the State of Florida. I am lamiliar	with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered.				Agent alignature required when reinstating) OATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Financi     Trust Fund Contribution.	го <u>П</u>	\$5.00 May Be Added to Fees	U00000444077 03/06/06-80038-001	150.00
10.	OFFICERS AND DIREC	TORS				······································
Title Name Street address City-St-Zip	O CASEMENT, ANDREA SZABO 700 FOUNTINAHEAD LANE NAPLES, FL					
T(TLE NAME STREET ADDRESS CITY-ST-ZIP	D CASEMENT, WILLIAM R 700 FOUNTAINHEAD LANE NAPLES, FL				. 및.	
THTLE NAME STREET ADDRESS CHY-ST-ZIP				DO	NOT WRITE	· -
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE	
title Name Street address City-St-Zip						
TITLE NAME STREET AODRESS						

12. I hereby certify that the information supplied with this filing does not quality 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:

239-261-7581