2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 322441

Address:

City-St-Zip:

950 HUNTINGHODGE DR

MIAMI SPRINGS, FL 00000,

Entity Name: DABAMA, INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 9165 PARK DR MIAMI SHORES, FL 33138 **Current Mailing Address: New Mailing Address:** C/O RICHARD M. FERNANDEZ P.O. BOX 530676 MIAMI SHORES, FL 331530676 FEI Number: 59-1285622 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FERNANDEZ, RICHARD 9165 PARK DR MIAMI SHORES, FL 33138 US 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition FERNANDEZ, GWENDOLYN S. Name: Name: 12940 NE 4TH AVE. Address: Address: City-St-Zip: MIAMI, FL 33161 City-St-Zip: Title: Title: (X) Change () Addition () Delete TRAVIS FAMILY PARTNERSHIP L.L.P. Name: TRAVIS. DEBORAH Name: 1169 MEADOWLARK AVE 1169 MEADOWLARK AVE Address: Address: MIAMI SPRINGS, FL 33166 MIAMI SPRINGS, FL 33166 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition BARNES, SHELDON H. Name: Name: 950 MAYFLOWER AVE Address: Address: City-St-Zip: MELBOURNE, FL City-St-Zip: Title: () Delete Title: () Change () Addition YATES, BASIL M Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: RICHARD M. FERNANDEZ RA 04/28/2009