## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 508968** 

**Entity Name: DATA ACCESS CORPORATION** 

**FILED** Aug 13, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

14000 SW 119 AVENUE MIAMI, FL 33186 US

**Current Mailing Address: New Mailing Address:** 

14000 SW 119 AVENUE MIAMI, FL 33186

FEI Number: 59-1678681 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:

CASANAVE, CHARLES L III 14000 SW 119 AVENUE MIAMI, FL 33186

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:

Date

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VSD ( ) Delete Title: (X) Change ( ) Addition CASANAVE, CHARLES L CASANAVE III, CHARLES L Name: Name: 13600 SW 186TH ST 18441 SW 85 CT Address: Address: City-St-Zip: MIAMI, FL 33177 US City-St-Zip: MIAMI, FL 33157 US

Title: PTD Title: (X) Change ( ) Addition () Delete

CASANAVE, CHARLES Name: Name: GARONE, TAREN 18441 SW 85TH CT Address: 15321 SW 154 TERR Address: MIAMI, FL 33157 US MIAMI, FL 33187 US City-St-Zip: City-St-Zip:

Title: Title: (X) Change ( ) Addition VD ( ) Delete VD.

MEELEY, STEPHEN W Name: MEELEY, STEPHEN W Name: 14532 SW 142 PLACE CIR 14105 WATERS EDGE COURT Address: Address: City-St-Zip: MIAMI, FL 33186 US City-St-Zip: MIDLOTHIAN, VA 23112 US

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.

SIGNATURE: CHARLES L. CASANAVE III PTD 08/13/2007