

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000005491

Entity Name: D.O.T. PROPERTIES N.V.

FILED
Apr 14, 2008
Secretary of State

Current Principal Place of Business:

BAUR & KLEIN, P.A.
100 N. BISCAYNE BLVD, 21ST FLOOR
MIAMI, FL 33132

New Principal Place of Business:

Current Mailing Address:

BAUR & KLEIN, P.A.
100 N. BISCAYNE BLVD, 21ST FLOOR
MIAMI, FL 33132

New Mailing Address:

FEI Number: 98-0064274 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLEIN, CHRISTOPHER J ESQ
BAUR & KLEIN, P.A.
100 N. BISCAYNE BLVD. 21ST FLOOR
MIAMI, FL 33132 US

Name and Address of New Registered Agent:

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:

Title: MD () Delete
Name: MADURO & CURIELS TRU, ST CO.
Address: PLAZA JO JO CORREZA 2-4
City-St-Zip: CURACAO, NETHERLANDS ANTILLES, AN

Title: MD () Delete
Name: FAIR, IAN DENNIS
Address: SEA GRAPE HOUSE, EASTERN RD
City-St-Zip: NEW PROVIDENCE, BAHAMAS, BH

Title: S () Delete
Name: THOMPSON, JOAN LYNN
Address: 8 YORK AVE, GLENISTON GARDENS
City-St-Zip: NEW PROVIDENCE, BAHAMAS, BH

Title: MD () Delete
Name: PARSON, GUY T.E.
Address: 17 LEWES ROAD
City-St-Zip: HAYWARDS HEATH, UK, UK

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: IAN DENNIS FAIR

MD

04/14/2008

Electronic Signature of Signing Officer or Director

_____ Date