

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000026414

FILED
Aug 06, 2009
Secretary of State

Entity Name: DAMON AUTOSPORT INC.

Current Principal Place of Business:

9455 COLLINS AVE STE 901
SURFSIDE, FL 33154

New Principal Place of Business:

5161 NW 79TH AVE UNIT # 12
DORAL, FL 33166

Current Mailing Address:

9455 COLLINS AVE STE 901
SURFSIDE, FL 33154

New Mailing Address:

5161 NW 79TH AVE UNIT # 12
DORAL, FL 33166

FEI Number: 76-0731177

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FRANCO, GLORIA
11549 NW 62 TERRACE
NO. 437
DORAL, FL 33178 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MONTICELLI, DANNY
Address: 9455 COLLINS AVE STE 901
City-St-Zip: SURFSIDE, FL 33154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: DANNY MONTICELLI

OFFI

08/06/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date