

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Aug 25, 2009
Secretary of State**

DOCUMENT# P04000158849

Entity Name: DSN PRODUCTS, INC.

Current Principal Place of Business:

4121 SW 47TH AVE, SUITE 1319
DAVIE, FL 33314

New Principal Place of Business:

3600 HACIENDA BLVD
STE C.
DAVIE, FL 33314

Current Mailing Address:

4121 SW 47TH AVE, SUITE 1319
DAVIE, FL 33314

New Mailing Address:

3600 HACIENDA BLVD
STE C.
DAVIE, FL 33314

FEI Number: 20-2238673

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HANSON, SHOHREH
4121 SW 47TH AVE. STE 1319
DAVIE, FL 33314 US

Name and Address of New Registered Agent:

HANSON, SHOHREH
3600 HACIENDA BLVD
STE C
DAVIE, FL 33314 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: SHOHREH HANSON

08/25/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTSD () Delete
Name: HANSON, SHOHREH
Address: 4121 SW 47TH AVE, SUITE 1319
City-St-Zip: DAVIE, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition
Name: HANSON, SHOHREH
Address: 3600 HACIENDA BLVD, STE C.
City-St-Zip: DAVIE, FL 33314

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: SHOHREH HANSON

PTSD

08/25/2009

Electronic Signature of Signing Officer or Director

Date