

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F60453

FILED  
Apr 10, 2006  
Secretary of State

Entity Name: DASAL CORPORATION

**Current Principal Place of Business:**

19355 NE 36 CT  
APT 24E  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

19355 NE 36 CT  
APT 24E  
AVENTURA, FL 33180

**New Mailing Address:**

FEI Number: 65-0151751

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BAUZA, ANTONIO S  
8260 SW 86 CT  
MIAMI, FL 33143 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: P ( ) Delete  
Name: DAVALOS, BERNARDO  
Address: 19355 NE 36 CT APT 24E  
City-St-Zip: AVENTURA, FL 33180

Title: ST ( ) Delete  
Name: DAVALOS, IRENE DE  
Address: 19355 NE 36 CT APT 24E  
City-St-Zip: AVENTURA, FL 33180

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: BERNARDO DAVALOS

P

04/10/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date