


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 29, 2007 8:00 am
Secretary of State

03-29-2007 90013 036 ***150.00

DOCUMENT # F97000003728 1. Entity Name DAVDEZ ARTS, INC.	
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Principal Place of Business 1300 DIAMOND SPRINGS RD STE. 600 VIRGINIA BEACH, VA 23455	Mailing Address 1300 DIAMOND SPRINGS RD STE. 600 VIRGINIA BEACH, VA 23455
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40043300



02202007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 54-1839664	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent GOLDIN, MIRIAM R 5030 CHAMPION BLVD G 6285 BOCA RATON, FL 33496
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HERNANDEZ, DAVID J 516 ARCHER LANE KISSIMMEE, FL 34746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC HINELINE, J L 5625 LAKE GRIFFIN RD LADY LAKE, FL 32159
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SDT GOLDIN, ARNOLD S 1300 DIAMOND SPRINGS ROAD, #600 VIRGINIA BEACH, VA 23453
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **A. Goldin/DIC** **3/19/07**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #