2007 FOR PROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

Jan 08, 2007 08:00 AM DOCUMENT # G18175 Secretary of State 1. Entity Name DAPAMA, INC. Principal Place of Business Mailing Address 1393 S.W. 1ST STREET #200 1393 S.W. 1ST STREET #200 MIAMI, FL 33135 MIAMI, FL 33135 01032007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 59-2405966 \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent MCDONALD, DAVID M DO NOT WRITE 1393 S.W. FIRST STREET **SUITE 200** IN THIS SPACE MIAMI, FL 33135 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, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE **PST** MCDONALD, DAVID NAME 1393 S W 1ST ST #200 STREET ADDRESS CITY-ST-ZIP MIAMI, FL UD0000577907 TITLE 01/09/07-80007-022 150.00 STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling 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

FILED