2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H56606

1. Entity Name
DAIMEX OF FLORIDA, INC.

Principal Place of Business	Mailing Address
2020 TAMIAMI TRAIL PORT CHARLOTTE, FL 33952	2020 TAMIAMI TRAIL PORT CHARLOTTE, FL 33952

DO NOT WRITE IN THIS SPACE

01102007   No Chg-P   CR2E034 (11/05)

4. FEI Number		Applied For
59-2638717		Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
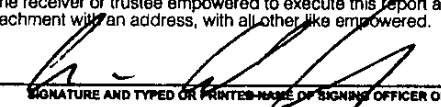
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6. Name and Address of Current Registered Agent

WOTITZKY, EDWARD L
109 TAYLOR STREET, STE. 112
PUNTA GORDA, FL 33950

DO NOT WRITE IN THIS SPACE

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_____

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

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

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10.   OFFICERS AND DIRECTORS

TITLE	PSTD
NAME	AL-ARNASI, ABRAHAM
STREET ADDRESS	2020 TAMIAMI TRAIL
CITY-ST-ZIP	PORT CHARLOTTE, FL 33952

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
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TITLE	
NAME	
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CITY-ST-ZIP	

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05/01/07-80143-015 150.00

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: _____ 4/18/07

<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #</small>