2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J24640

Entity Name: DAB-A-J, INC.

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
709 NE 3F BELLE GL	RD ST .ADE, FL 3343	0			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
709 NE 3F BELLE GL	RD ST .ADE, FL 3343	0			
FEI Number	: 59-2741625	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
The above	AIN ST ADE, FL. 33430 a named entity s	submits this statement for the p	purpose of changing its registere	ed office or registered agent, or both,	
	e of Florida.				
SIGNATUI		ic Signature of Registered Ag	ent	Date	
Election Car		Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () ADAMS-ROBER 1100 N MAIN S' BELLE GLADE,	Γ. SUITE C	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DST () HORNER, BETH 709 NE 3RD ST BELLE GLADE,	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV () LOHMANN, ANG 1109 NE 2ND S BELLE GLADE,	TREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV () SMITH, JAYNA 1641 SE AVE I BELLE GLADE,	Delete FL 33430	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ANGEE LOHMANN VP 04/24/2009

Electronic Signature of Signing Officer or Director

Date