

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000788

FILED
Mar 25, 2009
Secretary of State

Entity Name: DUO MASTER ASSOCIATION, INC.

Current Principal Place of Business:

6535 NOVA DR
STE 106
DAVIE, FL 33317

New Principal Place of Business:

1755 E HALLANDALE BEACH BLVD.
MANAGEMENT OFFICE
HALLANDALE BEACH, FL 33009

Current Mailing Address:

6535 NOVA DR
STE 106
DAVIE, FL 33317

New Mailing Address:

1755 E HALLANDALE BEACH BLVD.
MANAGEMENT OFFICE
HALLANDALE BEACH, FL 33009

FEI Number: 20-8053946

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:

GLAZER & ASSOCIATES, P.A.
3113 STIRLING ROAD
SUITE 201
HOLLYWOOD, FL 33312 US

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: ERIC GLAZER

03/25/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: REICH, DAVID
Address: 6535 NOVA DR - STE 106
City-St-Zip: DAVIE, FL 33317

Title: VPD () Delete
Name: REICH, OLIVER
Address: 6535 NOVA DR - STE 106
City-St-Zip: DAVIE, FL 33317

Title: STD () Delete
Name: SCHULTZ, DAVID
Address: 6535 NOVA DR - STE 106
City-St-Zip: DAVIE, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ZEIDMAN, SEYMOUR
Address: 1745 E HALLANDALE BEACH BLVD. #806W
City-St-Zip: HALLANDALE, FL 33009

Title: VPD (X) Change () Addition
Name: MELO, RODRIGO
Address: 1745 E HALLANDALE BEACH BLVD. #907W
City-St-Zip: HALLANDALE, FL 33009

Title: STD (X) Change () Addition
Name: ODONELL, JAMES
Address: 1755 E HALLANDALE BEACH BLVD. #2504E
City-St-Zip: HALLANDALE, FL 33009

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLINGTON PINNOCK

PM

03/25/2009

Electronic Signature of Signing Officer or Director

Date