

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002311

FILED
Apr 20, 2009
Secretary of State

Entity Name: DA VIDA, CORP.

Current Principal Place of Business:

4091 121ST TERRACE N
ROYAL PALM BEACH, FL 33414

New Principal Place of Business:

Current Mailing Address:

4091 121ST TERRACE N
ROYAL PALM BEACH, FL 33414

New Mailing Address:

FEI Number: 74-3218251

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVA, EFRAIN
4091 121ST TERRACE N
ROYAL PALM BEACH, FL 33414 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SILVA, EFRAIN
Address: 4091 121ST TERRACE N
City-St-Zip: ROYAL PALM BEACH, FL 33414

Title: D () Delete
Name: NELMS, EYBETT
Address: 27A BEDFORD COURT
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D () Delete
Name: SILVA, EFRAIN
Address: 4091 121ST TERRACE N
City-St-Zip: ROYAL PALM BEACH, FL 33414

Title: D () Delete
Name: SILVA, BETTY
Address: 4091 121ST TERRACE N
City-St-Zip: ROYAL PALM BEACH, FL 33414

Title: D () Delete
Name: NELMS, STEPHEN
Address: 27A BEDFORD COURT
City-St-Zip: ROYAL PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: EFRAIN SILVA

P

04/20/2009

Electronic Signature of Signing Officer or Director

Date