

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000041799

Entity Name: D.A.M CONVERSATIONAL PIECES, INC.

FILED
Apr 15, 2005
Secretary of State

Current Principal Place of Business:

734 SHERWOOD TERRACE DRIVE
APT. 206
ORLANDO, FL 32818

New Principal Place of Business:

2889 CANYON TRAIL LANE
OCOE, FL 34761

Current Mailing Address:

P.O. BOX 681485
ORLANDO, FL 328681485

New Mailing Address:

FEI Number: 59-3643262

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUIR, DOREEN
734 SHERWOOD TERR. DRIVE #206
ORLANDO, FL 32818 US

Name and Address of New Registered Agent:

MUIR, DOREEN
2889 CANYON TRAIL LANE
OCOE, FL 34761 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:

Electronic Signature of Registered Agent

04/15/2005

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MUIR, DOREEN
Address: 734 SHERWOOD TERRACE DR. #206
City-St-Zip: ORLANDO, FL 32818

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MUIR, DOREEN
Address: 2889 CANYON TRAIL LANE
City-St-Zip: OCOE, FL 34761

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DOREEN MUIR

Electronic Signature of Signing Officer or Director

P

04/15/2005

Date