

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000061739

Entity Name: DLAVACE, INC.

FILED
Apr 17, 2008
Secretary of State

Current Principal Place of Business:

6420 METROWEST BLVD
1023
ORLANDO, FL 32835

New Principal Place of Business:

4295 COOL EMERALD DRIVE
TALLAHASSEE, FL 32301

Current Mailing Address:

6420 METROWEST BLVD
1023
ORLANDO, FL 32835

New Mailing Address:

4295 COOL EMERALD DRIVE
TALLAHASSEE, FL 32301

FEI Number: 59-3655167

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALTERS, DONNA L
6420 METROWEST BLVD
1023
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

SALTERS, DONNA L
4295 COOL EMERALD DRIVE
TALLAHASSEE, FL 32303 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: DONNA L. SALTERS

04/17/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SALTERS, DONNA L
Address: 6420 METROWEST BLVD, # 1023
City-St-Zip: ORLANDO, FL 32835

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SALTERS, DONNA L
Address: 4295 COOL EMERALD DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: VP () Change (X) Addition
Name: SALTERS, BRANDON A
Address: 4295 COOL EMERALD DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: CFO () Change (X) Addition
Name: SALTERS-BROWN, DEBRA
Address: 231 MOCCASIN TRAIL
City-St-Zip: HAVANA, FL 32333

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: DONNA L. SALTERS

D

04/17/2008

Electronic Signature of Signing Officer or Director

Date