2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000029240

Entity Name: DAVE PERRAS INC.

FILED Feb 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

18615 LE DEUPHINE PLACE 19239 N DALE MABRY

LUTZ, FL 33558 STE 333

LUTZ, FL 33548

Current Mailing Address: New Mailing Address:

18615 LE DAUPHINE PLACE 19239 N DALE MABRY

LUTZ, FL 33558 STE 333 LUTZ, FL 33548

FEI Number: 59-3707672 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:

DAVE PERRAS PAINTING INC.

18615 LE DAUPHINE PLACE

LUTZ, FL 33558 US

ALL FLORIDA FIRM, INC

813 DELTONA BLVD STE A

BOX 1390650

JTZ, FL 33558 US BOX 1390650 DELTONA, FL 32725 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: CHRISTINA CLARK FOR ALL FLORIDA FIRM, INC 02/19/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: P (X) Change () Addition Name: PERRAS, DAVE Name: PERRAS, DAVE R

Address: 18615 LE DEUPHNE PLACE Address: 19239 N DALE MABRY STE 333

City-St-Zip: LUTZ, FL 33558 City-St-Zip: LUTZ, FL 33548

Title: V.P. () Delete Title: VP (X) Change () Addition

Name: PERRAS, BARBARA Name: PERRAS, BARBARA J

Address: 18615 LE DAUPHINE PLACE Address: 19239 N DALE MABRY STE 333

City-St-Zip: LUTZ, FL 33558 City-St-Zip: LUTZ, FL 33548

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: CHRISTINA CLARK FOR DAVID R. PERRAS P 02/19/2009