

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000075581

Entity Name: DUVOPH CORPORATION

FILED  
Mar 17, 2009  
Secretary of State

**Current Principal Place of Business:**

13170 SW 128 STREET  
# 203  
MIAMI, FL 33186

**New Principal Place of Business:**

12060 SW 129 CT  
104  
MIAMI, FL 33186

**Current Mailing Address:**

PO BOX 9494  
PORT SAINT LUCIE, FL 34985

**New Mailing Address:**

PO 450424  
SUNRISE, FL 33345

FEI Number: 65-1141842

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MARTIN OSSA  
8460 SUNRISE LAKES BLVD. 309  
SUNRISE, FL 33322 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: OSSA, MARTIN  
Address: 8460 SUNRISE LAKE BLVD 52-309  
City-St-Zip: SUNRISE, FL 33322

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

SIGNATURE: MARTIN OSSA

P

03/17/2009

Electronic Signature of Signing Officer or Director

Date