

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000108808

Entity Name: DAVIDS INVESTMENTS, INC.

FILED
Apr 15, 2006
Secretary of State

Current Principal Place of Business:

715 BLOOM ST
SUITE 134
KISSIMMEE, FL 34747

New Principal Place of Business:

1428 STICKLEY AVENUE
CELEBRATION, FL 34747

Current Mailing Address:

753 OAK SHADOWS ROAD
CELEBRATION, FL 34747

New Mailing Address:

1428 STICKLEY AVENUE
CELEBRATION, FL 34747

FEI Number: 59-3755792

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIDS, TONY FRANCOIS
753 OAK SHADOWS ROAD
CELEBRATION, FL 34747 US

Name and Address of New Registered Agent:

DAVIDS, TONY FRANCOIS
1428 STICKLEY AVENUE
CELEBRATION, FL 34747 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: TONY DAVIDS

04/15/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DAVIDS, TONY FRANCOIS
Address: 753 OAK SHADOWS ROAD
City-St-Zip: CELEBRATION, FL 34747

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DAVIDS, TONY FRANCOIS
Address: 1428 STICKLEY AVENUE
City-St-Zip: CELEBRATION, FL 34747

I hereby certify that the information supplied with this filing does not qualify for the 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: TONY DAVIDS

PD

04/15/2006

Electronic Signature of Signing Officer or Director

Date