2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000069449

Entity Name: DEZCA ENTERPRISES, INC.

FILED Jul 29, 2008 Secretary of State

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

17009 SW 33 CT. 4138 SW 195TH TERRACE MIRAMAR, FL 33027 MIRAMAR, FL 33029

Current Mailing Address: New Mailing Address:

17009 SW 33 CT. 4138 SW 195TH TERRACE MIRAMAR, FL 33027 MIRAMAR, FL 33029

FEI Number: 04-3691640 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:

MENDEZ, BELINDA
17009 SW 33 CT
MIRAMAR, FL 33027 US

MENDEZ, BELINDA
4138 SW 195TH TERRACE
MIRAMAR, FL 33029 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: BELINDA MENDEZ 07/29/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete

 Name:
 MENDEZ, BELINDA

 Address:
 17009 SW 33 CT

 City-St-Zip:
 MIRAMAR, FL 33027

 Title:
 DVP
 () Delete

 Name:
 CASTRILLO, MARVIN A

 Address:
 17009 SW 33 CT

 City-St-Zip:
 MIRAMAR, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition

 Name:
 MENDEZ, BELINDA

 Address:
 4138 SW 195TH TERRACE

 City-St-Zip:
 MIRAMAR, FL 33029

Title: DVP (X) Change () Addition

Name: CASTRILLO, MARVIN A
Address: 4138 SW 195TH TERRACE
City-St-Zip: MIRAMAR, FL 33029

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: BELINDA MENDEZ PRES 07/29/2008