

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000026700

Entity Name: DLODMAC, INC.

FILED
Apr 29, 2004
Secretary of State

Current Principal Place of Business:

219 ANTILLA AVE., STE. 8
CORAL GABLES, FL 33134

New Principal Place of Business:

1020 SW 22ND ST
MIAMI, FL 33129

Current Mailing Address:

219 ANTILLA AVE., STE. 8
CORAL GABLES, FL 33134

New Mailing Address:

1020 SW 22ND ST
MIAMI, FL 33129

FEI Number: 04-3744555

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, ROY ESQ.
219 ANTILLA AVE., STE. 8
CORAL GABLES, FL 33134

Name and Address of New Registered Agent:

GONZALEZ, ROY ESQ.
1020 SW 22ND ST
MIAMI, FL 33134

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:

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCPHERSON, DAVID
Address: 219 ANTILLA AVE., STE. 8
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: DILONARDO, MARIO
Address: 219 ANTILLA AVE., STE. 8
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MCPHERSON, DAVID
Address: 1020 SW 22ND ST
City-St-Zip: MIAMI, FL 33129

Title: D (X) Change () Addition
Name: DILONARDO, MARIO
Address: 1020 SW 22ND ST
City-St-Zip: CORAL GABLES, FL 33129

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID MCPHERSON

D

04/29/2004

Electronic Signature of Signing Officer or Director

Date