2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2008
Secretary of State

DOCUMENT# P03000090900

Entity Name: DAFCO TRADING CORP.

Current Principal Place of Business:

7230 NE MIAMI CT
MIAMI, FL 33138

New Principal Place of Business:

Current Mailing Address:

7230 NE MIAMI CT
MIAMI, FL 33138

New Mailing Address:

FEI Number: 90-0179522 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOZANDIER, LOUIS W
7230 NE MIAMI CT
MIAMI, FL 33138 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: LOZANDIER, LOUIS W
Address: 7230 NE MIAMI CT
City-St-Zip: MIAMI, FL 33138

Title: VP ( ) Delete
Name: LOZANDIER, WILDY
Address: 7230 NE MIAMI CT
City-St-Zip: MIAMI, FL 33138

Title: S ( ) Delete
Name: CELONY, RENOLD
Address: 565 NW 133 ST MIAMI
City-St-Zip: MIAMI, FL 33168

Title: D (X) Delete
Name: MONDESIR, LEON T
Address: 90 NE 54TH STREET
City-St-Zip: MIAMI, FL 33137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: JUNIDE, ALCIME
Address: 1320 NE 147TH STREET
City-St-Zip: MIAMI, FL 33161

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JUNIDE ALCIME PRES 03/17/2008

Electronic Signature of Signing Officer or Director — Date