## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000020902

Entity Name: DAVID ALLEN ENTERPRISES INC.

FILED Apr 11, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

835 MERIDIAN AVENUE 2730 SW 3RD AVE 12 SUITE #700 MIAMI BEACH, FL 33139 MIAMI, FL 33129

Current Mailing Address: New Mailing Address:

835 MERIDIAN AVENUE 2730 SW 3RD AVENUE 12 SUITE #700 MIAMI BEACH, FL 33139 MIAMI, FL 33129

FEI Number: 81-0643105 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:

D'OVIDIO, DAVID A
835 MERIDIAN AVENUE
12
MIAMI BEACH, FL 33139 US

D'OVIDIO, DAVID A
1505 SW 11 TERRACE
MIAMI, FL 33135 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: 04/11/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: PVST ( ) Delete Title: PVST (X) Change ( ) Addition

 Name:
 D'OVIDIO, DAVID A
 Name:
 D'OVIDIO, DAVID A

 Address:
 835 MERIDIAN AVENUE, SUITE 12
 Address:
 1505 SW 11 TERRACE

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 MIAMI, FL 33135

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 D'OVIDIO, DAVID A
 Name:
 D'OVIDIO, DAVID A

 Address:
 835 MERIDIAN AVENUE, SUITE 12
 Address:
 1505 SW 11 TERRACE

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 MIAMI, FL 33135

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 A. DOVIDIO PVST 04/11/2005