

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000068376

FILED
Jan 10, 2007
Secretary of State

Entity Name: STATEWIDE DISABILITY ADVOCATES, INC.

Current Principal Place of Business:

20547 OLD CUTLER RD
PMB 305
MIAMI, FL 33189 US

New Principal Place of Business:

18331 PINES BLVD
PMB 225
PEMBROKE PINES, FL 33029 US

Current Mailing Address:

20547 OLD CUTLER RD
PMB 305
MIAMI, FL 33189 US

New Mailing Address:

18331 PINES BLVD
PMB 225
PEMBROKE PINES, FL 33029 US

FEI Number: 20-1056584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAWKINS, DARRYL
13051 NW 1ST ST. APT.104
PEMBROKE PINES, FL 33028 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: D () Delete
Name: DAWKINS, DARRYL
Address: 13051 NW 1ST STREET APT.104
City-St-Zip: PEMBROKE PINES, FL 33028 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: DARRYL DAWKINS

D

01/10/2007

Electronic Signature of Signing Officer or Director

Date