

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000106760

Entity Name: DUDAN ALL SERVICES, INC.

FILED  
May 01, 2009  
Secretary of State

## Current Principal Place of Business:

2678 SW ACCO ROAD  
PORT SAINT LUCIE, FL 34953

## New Principal Place of Business:

1994 SW JAMES PORT DRIVE  
PORT SAINT LUCIE, FL 34953

## Current Mailing Address:

2678 SW ACCO ROAD  
PORT SAINT LUCIE, FL 34953

## New Mailing Address:

1994 SW JAMES PORT DRIVE  
PORT SAINT LUCIE, FL 34953

FEI Number: 20-1382515

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION  
1261 E SAMPLE RD  
POMPANO BEACH, FL 33064 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

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: PD ( ) Delete  
Name: DA COSTA, EDUARDO LUIZ  
Address: 2678 SW ACCO ROAD  
City-St-Zip: PORT SAINT LUCIE, FL 34953

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: DA COSTA, EDUARDO LUIZ  
Address: 1994 SW JAMES PORT DRIVE  
City-St-Zip: PORT SAINT LUCIE, FL 34953

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: EDUARDO LUIZ LEITE DA COSTA

PRES

05/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date