

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000139226

FILED
Jul 01, 2007
Secretary of State

Entity Name: DYOLL ENTERPRISES INC

Current Principal Place of Business:

4141 NW 44 AVE
321
LAUDERDALE LAKES, FL 33319

New Principal Place of Business:

Current Mailing Address:

4141 NW 44 AVE
321
LAUDERDALE LAKES, FL 33319

New Mailing Address:

FEI Number: 73-1720221 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWELL, OSWALD L P
4141 NW 44 AVE
321
LAUDERDALE LAKES, FL 33319 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: P () Delete
Name: POWELL, OSWALD L
Address: 4141 NW 44 AVE
City-St-Zip: LAUDERDALE LAKES, FL 33319 US

Title: T () Delete
Name: POWELL, RHONA S
Address: 12206 NORTHWOOD DR
City-St-Zip: UPPER MARBORO, MD 20772 US

Title: VP () Delete
Name: POWELL, LESLIE A
Address: 12206 NORTHWOOD DR
City-St-Zip: UPPER MARBORO, MD 20772 US

Title: S () Delete
Name: NORA, BENJAMIN
Address: 15026 GREEN VALLEY BLVD
City-St-Zip: CLERMONT, FL 34711 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: POWELL, RHONA S
Address: 12206 NORTHWOOD DR
City-St-Zip: UPPER MARBORO, MD 20772 US

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

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

Title: CEO () Change (X) Addition
Name: FULLER, MICHELLE A CEO
Address: 454 EAST 186TH STREET
City-St-Zip: BRONX, NY 10458

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: MICHELLE A FULLER

CEO

07/01/2007

Electronic Signature of Signing Officer or Director

_____ Date