


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

2007 FEB -9 AM 11:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P05000059129					
1. Entity Name D.M.E. MARKET INC.					
Principal Place of Business 502 E. CENTRAL AVENUE APOPKA, FL 32703 US			Mailing Address 502 E. CENTRAL AVENUE APOPKA, FL 32703 US		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 01242007 Chg-P CR2E034 (12/06) 04-3812512	
				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
GARCIA, MARIBEL 10743 BOCA POINTE DRIVE ORLANDO, FL 32836			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: <i>Maribel Garcia</i>			DATE: 2/5/07		
Signature, typed or printed name of registered agent and title if applicable.			(NOTE: Registered Agent signature required when reinstating)		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
			100089986001 03/02/07--01004--029 *\$150.75		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	GARCIA, MARIBEL		NAME		
STREET ADDRESS	10743 BOCA POINTE ROAD		STREET ADDRESS		
CITY - ST - ZIP	ORLANDO, FL 32836		CITY - ST - ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MORILLO, ELVIS		NAME		
STREET ADDRESS	1155 GREENSTONE BLVD.		STREET ADDRESS		
CITY - ST - ZIP	LAKE MARY, FL 32476		CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
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STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Maribel Garcia</i>			DATE: 2/5/07		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone #		



01242007 Chg-P CR2E034 (12/06)

4. FEI Number
04-3812512

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7. Name and Address of New Registered Agent

Name

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SIGNATURE: *Maribel Garcia*

DATE: 2/5/07

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(NOTE: Registered Agent signature required when reinstating)

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100089986001

03/02/07--01004--029 *\$150.75

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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10743 BOCA POINTE ROAD

CITY - ST - ZIP

ORLANDO, FL 32836

TITLE

VP

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