## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P05000078061

**Entity Name: DAVAN EXPORT CORPORATION** 

FILED Sep 29, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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10016 EASTER LAKE AVE **APT 202** 

ORLANDO, FL 32817

9621 SIDNEY HAYES RD ORLANDO, FL 32824

**Current Mailing Address:** 

**New Mailing Address:** 

10016 EASTER LAKE AVE APT 202 ORLANDO, FL 32817 US

FEI Number: 20-2920155 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:

MENDOZA, LEONARDO 10016 EASTER LAKE AVE APT 202 ORLANDO, FL 32817 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:

Title:

Name:

Address:

City-St-Zip:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

VΡ

(X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

MUNOZ, JEAN P 10016 EASTER LAKE AVE ORLANDO, FL 32817 US

( ) Delete

( ) Delete Title: VΡ RODRIGUEZ, ROMEIRA Name: 10016 EASTER LAKE AVE Address: ORLANDO, FL 32817 US City-St-Zip:

Title: OFF (X) Delete

MENDOZA, LEONARDO OFFICER Name: 10016 EASTER LAKE AVE Address: City-St-Zip: ORLANDO, FL 32817 US

10016 EASTER LAKE AVE Address: City-St-Zip: ORLANDO, FL 32817 US

RODRIGUEZ, ROMEIRA

(X) Change ( ) Addition MENDOZA, LEONARDO Name: 10016 EASTER LAKE AVE Address: ORLANDO, FL 32817 US City-St-Zip:

Title: () Change () Addition

Name: Address: City-St-Zip:

Title:

Title:

Name:

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.

VΡ SIGNATURE: LEONARDO MENDOZA 09/29/2006