2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000119031

Entity Name: DAVE'S WHOLESALE INCORPORATED

FILED Apr 04, 2007 Secretary of State

 2450 HOLLYWOOD BLVD,
 4701 SW 45 STREET

 SUITE 204
 BUILDING #9 BAY 32

 HOLLYWOOD, FL 33020
 DAVIE, FL 33314

Current Mailing Address: New Mailing Address:

 2450 HOLLYWOOD BLVD,
 4701 SW 45 STREET

 SUITE 204
 BUILDIN #9 BAY 32

 HOLLYWOOD, FL 33020
 DAVIE, FL 33314

FEI Number: 43-2091013 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:

BERCOVICZ, DAVID M
2450 HOLLYWOOD BLVD,
SUITE 204
HOLLYWOOD, FL 33020 US
BERCOVICZ, DAVID M
4701 SW 45 STREET
BUILDING #9 BAY 32
DAVIE, FL 33314 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: DAVID BERCOVICZ 04/04/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: BERCOVICZ, DAVID M Name: BERCOVICZ, DAVID M

Name:BERCOVICZ, DAVID MName:BERCOVICZ, DAVID MAddress:2450 HOLLYWOOD BLVD, SUITE 204Address:4701 SW 45 STREET BLDG. 9 BAY 32

City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip: DAVIE, FL 33314

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$

Name: BERCOVICZ, LAURIE A Name: BERCOVICZ, LAURIE A

Address: 2450 HOLLYWOOD BLVD, SUITE 204 Address: 4701 SW 45 STREET BLDG. 9 BAY 32

City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip: DAVIE, FL 33314

Title: ST () Delete Title: ST (X) Change () Addition

Name: BERK, MARLENE Name: BERK, MARLENE

Address: 2450 HOLLYWOOD BLVD, SUITE 204 Address: 4701 SW 45 STREET BLDG. 9 BAY 32

City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip: DAVIE, FL 33314

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: DAVID BERCOVICZ P 04/04/2007