

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000042041

Entity Name: D.F.P. SERVICES, INC.

FILED
Feb 23, 2007
Secretary of State

Current Principal Place of Business:

10135 GATE PARKWAY N. APT 1901
JACKSONVILLE, FL 32246

New Principal Place of Business:

8787 SOUTHSIDE BLVD
2609
JACKSONVILLE, FL 32256

Current Mailing Address:

10135 GATE PARKWAY N. APT 1901
JACKSONVILLE, FL 32246

New Mailing Address:

8787 SOUTHSIDE BLVD
JACKSONVILLE, FL 32256

FEI Number: 20-4554569

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREITAS PEREIRA, DIOGO DE
10135 GATE PARKWAY N. APT 1901
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

FREITAS PEREIRA, DIOGO DE
8787 SOUTHSIDE BLVD
JACKSONVILLE, FL 32256 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: DIOGO DE FREITAS PEREIRA

02/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: FREITAS PEREIRA, DIOGO DE
Address: 10135 GATE PARKWAY N. APT 1901
City-St-Zip: JACKSONVILLE, FL 32246

Title: D (X) Delete
Name: FREITAS PEREIRA, DIOGO DE
Address: 10135 GATE PARKWAY N. APT 1901
City-St-Zip: JACKSONVILLE, FL 32246

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: FREITAS PEREIRA, DIOGO DE
Address: 8787 SOUTHSIDE BLVD
City-St-Zip: JACKSONVILLE, FL 32256

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

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: DIOGO DE FREITAS PEREIRA

PVST

02/23/2007

Electronic Signature of Signing Officer or Director

Date