

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000071967

Entity Name: DM PROFESSIONAL SERVICES, INC.

FILED
May 11, 2007
Secretary of State

Current Principal Place of Business:

4377 SW 10TH STREET
305
DEERFIELD BEACH, FL 33442

Current Mailing Address:

4377 SW 10TH STREET
305
DEERFIELD BEACH, FL 33442 US

FEI Number: 20-4938577

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINS, DECIO
4377 SW 10TH STREET
305
DEERFIELD BEACH, FL 33442 US

New Principal Place of Business:

4365 SW 10TH STREET
304
DEERFIELD BEACH, FL 33442

New Mailing Address:

4365 SW 10TH STREET
304
DEERFIELD BEACH, FL 33442 US

Name and Address of New Registered Agent:

SILVA, CLAUDINEI
4365 SW 10TH STREET
304
DEERFIELD BEACH, FL 33442 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: CLAUDINEI SILVA

05/11/2007

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: MARTINS, DECIO
Address: 4377 SW 10TH STREET #305
City-St-Zip: DEERFIELD BEACH, FL 33442 US

Title: D (X) Delete
Name: SILVA, CLAUDINEI
Address: 4377 SW 10TH STREET #305
City-St-Zip: DEERFIELD BEACH, FL 33442 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SILVA, CLAUDINEI
Address: 4365 SW 10TH STREET #304
City-St-Zip: DEERFIELD BEACH, FL 33442 US

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

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: CLAUDINEI SILVA

PD

05/11/2007

Electronic Signature of Signing Officer or Director

Date