

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000077454

Entity Name: DUQUE DANKO INC.

FILED
Apr 24, 2007
Secretary of State

Current Principal Place of Business:

2457 COLLINS AVE.
#305
MIAMI BEACH, FL 33140

New Principal Place of Business:

5161 COLLINS AVE. #801
MIAMI BEACH, FL 33140

Current Mailing Address:

2457 COLLINS AVE.
#305
MIAMI BEACH, FL 33140

New Mailing Address:

5161 COLLINS AVE. #801
MIAMI BEACH, FL 33140

FEI Number: 20-5018104

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUQUE-DANKO, DOMINIQUE
2457 COLLINS AVE.
#305
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

DUQUE-DANKO, DOMINIQUE
5161 COLLINS AVE. #801
MIAMI BEACH, FL 33140 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: DUQUE-DANKO, DOMINIQUE

04/24/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: DUQUE-DANKO, DOMINIQUE
Address: 2457 COLLINS AVE. #305
City-St-Zip: MIAMI BEACH, FL 33140

Title: VD () Delete
Name: ESCOBAR, NICOLAS
Address: 2457 COLLINS AVE. #305
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: DUQUE-DANKO, DOMINIQUE
Address: 5161 COLLINS AVE. #801
City-St-Zip: MIAMI BEACH, FL 33140

Title: VD (X) Change () Addition
Name: ESCOBAR, NICOLAS
Address: 5161 COLLINS AVE. #801
City-St-Zip: MIAMI BEACH, FL 33140

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: ESCOBAR, NICOLAS

VD

04/24/2007

Electronic Signature of Signing Officer or Director

Date