

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008 8:00 am
Secretary of State

04-24-2008 90121 004 ***150.00

DOCUMENT # P07000076829					
1. Entity Name DN-MANAGEMENT, INC.					
Principal Place of Business 4000 N. FEDERAL HIGHWAY SUITE #206 BOCA RATON, FL 33431			Mailing Address 4000 N. FEDERAL HIGHWAY SUITE #206 BOCA RATON, FL 33431		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 1000 OMNI BLVD			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State NEWPORT NEWS, VA		4. FEI Number 26-0476437	
Zip		Country 23606		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CORPCO, INC. 2699 S. BAYSHORE DRIVE 7TH FLOOR MIAMI, FL 33133				Name Street Address (P.O. Box Number is Not Acceptable) City	
FL				Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)					
DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE D	NAME ECONOMOS, STANLEY D		<input type="checkbox"/> Delete		
STREET ADDRESS 4000 N. FEDERAL HIGHWAY 3206	CITY - ST - ZIP BOCA RATON, FL 33431		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE D	NAME ECONOMOS, NICHOLAS JR.		<input type="checkbox"/> Delete		
STREET ADDRESS 4000 N. FEDERAL HIGHWAY 3206	CITY - ST - ZIP BOCA RATON, FL 33431		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:			NICK ECONOMOS		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		
Daytime Phone #			04/21/2008 (757) 591-3519		