

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000098510

Entity Name: D&P OF MIAMI CORP.

FILED  
Apr 27, 2009  
Secretary of State

## Current Principal Place of Business:

11537 NW 27 AVENUE  
MIAMI, FL 33167 US

## New Principal Place of Business:

1530 NW 7 AVENUE  
MIAMI, FL 33136 US

## Current Mailing Address:

11537 NW 27 AVENUE  
MIAMI, FL 33167 US

## New Mailing Address:

1530 NW 7 AVENUE  
MIAMI, FL 33136 US

FEI Number: 26-0837685

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PORTO, EMIL A  
11537 NW 27 AVE  
MIAMI, FL 33167 US

## Name and Address of New Registered Agent:

PORTO, EMIL A  
717 PONCE DE LEON BLVD  
#326  
CORAL GABLES, FL 33134 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: EMIL PORTO

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PORTO, EMIL A  
Address: 11537 NW 27 AVE  
City-St-Zip: MIAMI, FL 33167 US

Title: VP ( ) Delete  
Name: DIAZ, PLACIDO  
Address: 11537 NW 27 AVE  
City-St-Zip: MIAMI, FL 33167 US

Title: S ( ) Delete  
Name: DIAZ, PLACIDO  
Address: 11537 NW 27 AVE  
City-St-Zip: MIAMI, FL 33167 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PORTO, EMIL A  
Address: 717 PONCE DE LEON BLVD #326  
City-St-Zip: MIAMI, FL 33167 US

Title: VP (X) Change ( ) Addition  
Name: DIAZ, PLACIDO  
Address: 717 PONCE DE LEON BLVD #326  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: S (X) Change ( ) Addition  
Name: DIAZ, PLACIDO  
Address: 717 PONCE DE LEON BLVD #326  
City-St-Zip: CORAL GABLES, FL 33134 US

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: EMIL PORTO

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date