## Apr 29, 2008 8:00 am Secretary of State 2008 FOR PROFIT CORPORATION **ANNUAL REPORT DOCUMENT # P07000109159** 04-29-2008 90073 041 \*\*\*163.75 1. Entity Name DAMÁDA INC. **Mailing Address** Principal Place of Business 2801 NW 68TH LANE 2801 NW 68TH LANE MARGATE, FL 33063 MARGATE, FL 33063 2. Principal Place of Bur .ness - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04142008 Chg-P CR2E034 (12/06) 4. FEI Number City & State City & State Applied For EIN# 261 183 179 Not Applicable Zio Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TORRES, MANNY A Street Address (P.O. Box Number is Not Acceptable) 2801 NW 68TH LANE MARGATE, FL 33063 City 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. Signature, typed or printed reme of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PRES TITLE □ Delete TITLE ☐ Change ☐ Addition TORRES, MANNY A MAG NAME STREET ADDRESS 2801 NW 68TH LANE STREET ADDRESS CITY-ST-ZIP MARGATE, FL 33063 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TORRES, DANETTE HALE MALE STREET ADDRESS 2801 NW 68TH LANE STREET ADDRESS CITY-ST-ZIP MARGATE, FL 33063 CITY-ST-ZIP TITLE SEC. ☐ Detete ☐ Change ☐ Addition SLIPKOVICH, DANIEL HAME NAME STREET ADDRESS **2801 NW 68TH LANE** STREET ADDRESS CITY-ST-ZIP MARGATE, FL 33063 CTTY-ST-ZIP TITLE ☐ Detete ☐ Change ☐ Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete ☐ Change Addition NAME HALLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZEP TITLE ☐ Delete TITLE ☐ Chance ☐ Addition NATE HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 cath; 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 appropriate samples.

MANNY A. TORRES

G OFFICER OF DIRECTOR

TO OR PRINTED NAME OF RICH

SIGNATURE:

FILED

4-28-08 954-571-3030