2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000047290

Entity Name: DACCA BUSINESS, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2987 NW 110TH AVE SUNRISE, FL 33322

Current Mailing Address: New Mailing Address:

2987 NW 110TH AVE SUNRISE, FL 33322

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

UDDIN, MOHAMMAD N DULAL, MOHAMMAD 2987 NW 110TH AVE 6301 PARK ST

SUNRISE, FL 33322 US HOLLYWOOD, FL 33024 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: DULAL 04/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: DP (X) Change () Addition

 Name:
 UDDIN, MOHAMMAD N
 Name:
 DULAL, MOHAMMAD

 Address:
 2987 NW 110TH AVE
 Address:
 6301 PARK ST

 City-St-Zip:
 SUNRISE, FL 33322
 City-St-Zip:
 HOLLYWOOD, FL 33024

Title: D () Delete Title: () Change () Addition

Name: BEGUM, ROKSHANA Name:
Address: 6301 PARK ST Address:

City-St-Zip: HOLLYWOOD, FL 33024 City-St-Zip:

Title: D (X) Change () Additional City-St-Zip:

 Title:
 D () Delete
 Title:
 D (X) Change () Addition

 Name:
 RAHMAN, ZILLUR
 Name:
 HOQUE, MOHAMMAD A

 Address:
 2987 NW 110TH AVE
 Address:
 5821 MCKINLEY ST

 City-St-Zip:
 SUNRISE, FL 33322
 City-St-Zip:
 HOLLYWOOD, FL 33021

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: DULAL DP 04/30/2009