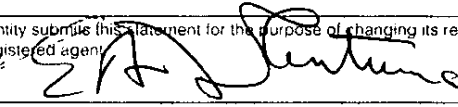
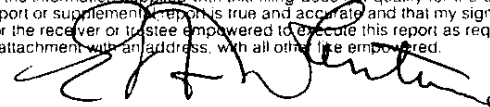


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90074 033 ***150.00

DOCUMENT # P35299					
1. Entity Name ED DANTUMA ENTERPRISES, INCORPORATED					
Principal Place of Business 217 N. WESTMONTE DR #2012 ALTAMONTE SPRINGS, FL 32714 US			Mailing Address 217 N. WESTMONTE DR #2012 ALTAMONTE SPRINGS, FL 32714 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1997272	
Zip		Country		Applied For Not Applicable	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
LOWMAN, WILLIAM R ESQ. ZIMMERMAN, SHUFFIELD, KISER, & SUTCLIFFE 1000 LEGION PL STE 1700 ORLANDO, FL 32801			Name Street Address (P.O. Box Number is Not Acceptable) SHUFFIELD LOWMAN 1000 LEGION PLACE, SUITE 1700 City ORLANDO FL Zip Code 32801		
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 resigning) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE P ☐ Delete	NAME DANTUMA, EDWARD F.		TITLE ☐ Change ☐ Addition		
STREET ADDRESS 30001 SUNSET POINT	CITY- ST- ZIP TAVARES, FL		STREET ADDRESS		
TITLE V ☐ Delete	NAME DANTUMA, PERSIS A.		TITLE ☐ Change ☐ Addition		
STREET ADDRESS 30001 SUNSET POINT	CITY- ST- ZIP TAVARES, FL		STREET ADDRESS		
TITLE CD ☐ Delete	NAME DANTUMA, DIRK		TITLE ☐ Change ☐ Addition		
STREET ADDRESS 59 IRVINE PARK	CITY- ST- ZIP ST. PAUL, MN 55102		STREET ADDRESS		
TITLE D ☐ Delete	NAME DANTUMA, JEFF		TITLE ☐ Change ☐ Addition		
STREET ADDRESS 8437 RIVER BRANCH PL.	CITY- ST- ZIP SANFORD, FL		STREET ADDRESS		
TITLE D ☐ Delete	NAME SCHANG, BRENDA		TITLE ☐ Change ☐ Addition		
STREET ADDRESS 217 N WESTMONTE DR 2012	CITY- ST- ZIP ALTAMONTE SPRINGS, FL 32714		STREET ADDRESS		
TITLE D ☐ Delete	NAME DANTUMA, DRIES		TITLE ☐ Change ☐ Addition		
STREET ADDRESS 8455 RIVER BRANCH PLACE	CITY- ST- ZIP SANFORD, FL 32771		STREET ADDRESS		
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 employment.					
SIGNATURE: 			1/24/07 407-774-5368 Date Daytime Phone #		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					