


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 10, 2008 08:00 A
Secretary of State

DOCUMENT # P97000035149 1. Entity Name DAMUJI SERVICES, INC.	
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Principal Place of Business 8548 SW 8TH STREET MIAMI, FL 33144 US	Mailing Address 8548 SW 8TH STREET -207 MIAMI, FL 33144 US
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DO NOT WRITE IN THIS SPACE

04042008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0745460	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**DE LA PRIDA, MARIA C
8458 SW 8TH STREET
MIAMI, FL 33144**

**DO NOT WRITE
IN THIS SPACE**

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	1100001889758 04/22/08-20068-017 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DE LA PRIDA, MARIA C 8548 SW 8TH ST MIAMI, FL 33144
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ORJALES, LOURDES V 8548 SW 8 STREET MIAMI, FL 33144
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BERMUDES, MARIA E 8548 SW 8 STREET MIAMI, FL L33144
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 an other, like empowered.

SIGNATURE: *Maria C. De la Prida* (MARAC@DELAPRIDA) 04/07/2008 200674947

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #