2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 19, 2007 08:00 A Secretary of State **DOCUMENT # P98000077350** 1. Entity Name DMA PROPERTY INVESTMENT GROUP, INC. Mailing Address Principal Place of Business 13295 BISCAYNE BAY TERRACE 13295 BISCAYNE BAY TERRACE NORTH MIAMI BEACH, FL 33181 NORTH MIAMI BEACH, FL 33181 CR2E034 (11/05) 02082007 No Chg-P Applied For 4. FEI Number 65-0864546 Not Applicable \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent AMOILS, DENNIS 13295 BISCAYNE TERRACE MIAMI, FL 33181 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. **PSTD** TITLE NAME AMOILS, DENNIS STREET ADDRESS 13295 BISCAYNE BAY TERRACE CITY-ST-ZIP NORTH MIAMI BEACH, FL 33181 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE IN THIS SPAC NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-\$1-ZIP TITLE NAME 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 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 empowered.

SIGNATURE:

IGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECT

4/13/07

Daytime Phone #

FILED