2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P99000065993

Entity Name: DPI FRANCHISE, INC.

Current Principal Place of Business:

400 S. DIXIE HWY.
MIAMI, FL 33146

New Principal Place of Business:

Current Mailing Address:

400 S. DIXIE HWY.
MIAMI, FL 33146

New Mailing Address:

FEI Number: 65-0987536 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

IGNACIO MORENO
7622 SW 129 PLACE
MIAMI, FL 33183 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: GORRIN, JUAN
Address: 10574 NW 51 ST
City-St-Zip: MIAMI, FL 33178

Title: D ( ) Delete
Name: GORRIN, ALVARO
Address: 400 SOUTH DIXIE HWY
City-St-Zip: CORAL GABLES, FL 33146

Title: VPT ( ) Delete
Name: MORENO, IGNACIO
Address: 7622 SW 129 PL.
City-St-Zip: MIAMI, FL 33183

Title: VPS ( ) Delete
Name: GORRIN, ALEJANDRA C
Address: 10424 NW 69 ST
City-St-Zip: MIAMI, FL 33178

Title: D ( ) Delete
Name: FINOL, ANDRES
Address: 400 SOUTH DIXIE HWY
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: ALVARO GORRIN D 04/30/2009

Electronic Signature of Signing Officer or Director — Date