

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000081659

Entity Name: DEALER INCOME SERVICES, INC.

FILED
Apr 23, 2007
Secretary of State

Current Principal Place of Business:

2100 N ATLANTIC AVE
#906
COCOA BEACH, FL 32931

New Principal Place of Business:

568 CASA BELLA DR
CAPE CANVERAL, FL 32920

Current Mailing Address:

2100 N ATLANTIC AVE
#906
COCOA BEACH, FL 32931

New Mailing Address:

568 CASA BELLA DR
CAPE CANVERAL, FL 32920

FEI Number: 59-3597883

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLEVELAND, RAOUL
2100 N ATLANTIC AVE #906
COCOA BEACH, FL 32931 US

Name and Address of New Registered Agent:

CLEVELAND, RAOUL
568 CASA BELLA DRIVE
CAPE CANVERAL, FL 32931 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: RAOUL C CLEVELEND

04/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CLEVELAND, RAOUL
Address: 2100 N ATLANTIC AVE
City-St-Zip: COCOA BEACH, FL 32931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CLEVELAND, RAOUL
Address: 568 CASA BELLA DR
City-St-Zip: CAPE CANVERAL, FL 32920

I hereby certify that the information supplied with this filing does not qualify for the 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: RAOUL C CLEVEND

PRES

04/23/2007

Electronic Signature of Signing Officer or Director

Date