


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2007 8:00 am
Secretary of State

04-13-2007 90157 007 ***150.00

DOCUMENT # P99000096207	
1. Entity Name DCI PRODUCTS, INC.	

Principal Place of Business 3900 N HILLS DR #114 HOLLYWOOD, FL 33021	Mailing Address 3900 N HILLS DR #114 HOLLYWOOD, FL 33021
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2. Principal Place of Business - No P.O. Box # 3929 PEMBROKE Rd.	3. Mailing Address P.O. BOX # 1105
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Hollywood FL	City & State Dania FL
Zip 33021	Zip 33004
Country USA	Country USA

40059044



04102007 Chg-P CR2E034 (12/06)

6. Name and Address of Current Registered Agent CREPEAU, DONALD P SR 3900 N HILLS DR #114 HOLLYWOOD, FL 33021	
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7. Name and Address of New Registered Agent Name: DONALD P. CREPEAU Street Address (P.O. Box Number is Not Acceptable): 3417 BUCHANAN ST. City: HOLLYWOOD FL Zip: 33021	
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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: <u>Donald P. Crepeau</u> DONALD P. CREPEAU D 4-10-07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>	
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CREPEAU, DONALD P SR 3900 N HILLS DR #114 HOLLYWOOD, FL 33021 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DONALD P. CREPEAU PRES <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3417 BUCHANAN ST HOLLYWOOD FL 33021
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DONALD P. CREPEAU <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3417 BUCHANAN ST. HOLLYWOOD FL 33021
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.	
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SIGNATURE: <u>Donald P. Crepeau</u> DONALD P. CREPEAU 4-10-07 954-558-0523 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>
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