

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S20406

FILED
May 29, 2008
Secretary of State

Entity Name: DEVELOPMENT ASSOCIATES INTERNATIONAL, INC.

Current Principal Place of Business:

3389 SHERIDAN ST SUITE 309
HOLLYWOOD, FL 33021

New Principal Place of Business:

3389 SHERIDAN ST
SUITE 309
HOLLYWOOD, FL 33021

Current Mailing Address:

3389 SHERIDAN ST SUITE 309
HOLLYWOOD, FL 33021

New Mailing Address:

3389 SHERIDAN ST
SUITE 309
HOLLYWOOD, FL 33021

FEI Number: 65-0234569

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDSTEIN, DONNA L.
3389 SHERIDAN ST SUITE 309
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

GOLDSTEIN, DONNA L.
3389 SHERIDAN ST
SUITE 309
HOLLYWOOD, FL 33021 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:

05/29/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GOLDSTEIN, DONNA L.
Address: 3389 SHERIDAN ST #309
City-St-Zip: HOLLYWOOD, FL

Title: ST () Delete
Name: GOLDSTEIN, DONNA L.
Address: 3389 SHERIDAN ST #309
City-St-Zip: HOLLYWOOD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GOLDSTEIN, DONNA L.
Address: 3389 SHERIDAN ST #309
City-St-Zip: HOLLYWOOD, FL 33021 US

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: DONNA L GOLDSTEIN

PD

05/29/2008

Electronic Signature of Signing Officer or Director

Date