2004 FOR PROFIT CORPORATION

ANNUAL REPORT **DOCUMENT # V50713** 1. Entity Name DAVÉ MCLAIN SERVICES, INC.

FILED Mar 15, 2004 08:00 AM Secretary of State

Princip	al Place	e of But	iness

3900 NW 113TH AVE SUNRISE, FL 33323

Mailing Address

3900 NW 113TH AVE SUNRISE, FL 33323



DO NOT WRITE IN THIS SPACE

02032004 No Chg-P _ CR2E034 (10/03) 4. FEI Number Applied For 65-0351664 Not Applicable \$8.75 Additional 5. Certificate of Status Desired. . .

Fee Required

6.	Name	and	Address	of	Curren	R	egister	ed A	jent
						-			

MCLAIN, DAVE 3900 NW 113TH AVE SUNRISE, FL 33323

DO NOT WRITE IN THIS SPACE

The above named entity submits this statement for the particle obligations of registered agent. SIGNATURE	Durpose of changing its registered office or registered agent, o	-
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.	e
18. OFFICERS AND DIRECT INTERPOLATION OF THE CONTROL OF THE CONTRO	CTORS	— U000000088716 — 03/15/04-80063-009 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		O NOT WRITE
STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP	<u> </u>	:.:
TITLE NAME STREET ADDRESS CITY-S1-ZIP	iling does not quality for the exemption stated in Section 119.07 and accurate and that my signature shall have the same legal o	7(3)(i), Florida Statutes, I further certify that the information

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:

SIMPLATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR