

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000050486

Entity Name: DOMAINCOLLECTION.COM, INC.

FILED  
Apr 27, 2005  
Secretary of State

**Current Principal Place of Business:**

1680 NW 82ND AVE  
MIAMI, FL 33126

**New Principal Place of Business:**

**Current Mailing Address:**

1680 NW 82ND AVE  
MIAMI, FL 33126

**New Mailing Address:**

FEI Number: 65-1016114      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

WASSERSTROM, BARRY  
4621 HOLLYWOOD BLVD  
SUITE 100  
HOLLYWOOD, FL 33021 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: PD ( ) Delete  
Name: LEVINSON, MATIAS  
Address: 1500 SAN REMO AVE, STE 125  
City-St-Zip: CORAL GABLES, FL 33146

Title: CEO ( ) Delete  
Name: LEVINSON, MATIAS  
Address: 1500 SAN REMO AVE, STE 125  
City-St-Zip: CORAL GABLES, FL 33146

Title: V ( ) Delete  
Name: RAUL CUENCE, ANTONIO  
Address: 1500 SAN REMO AVE, STE 125  
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: V (X) Change ( ) Addition  
Name: CUENCE, ANTONIO R  
Address: 1500 SAN REMO AVE, STE 125  
City-St-Zip: CORAL GABLES, FL 33146

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MATIAS LEVINSON

P

04/27/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date