

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000156241

Entity Name: AMERI-DOMINICAN, INC.

FILED  
Jan 05, 2006  
Secretary of State

**Current Principal Place of Business:**

699 NE 167 ST.  
N. MIAMI BEACH, FL 33162

**New Principal Place of Business:**

**Current Mailing Address:**

699 NE 167 ST.  
N. MIAMI BEACH, FL 33162

**New Mailing Address:**

FEI Number: 76-0807605

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DE FILLIPO, KENNETH A.  
17830 NE 10TH AVE.  
N. MIAMI BEACH, FL 33162 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: DP ( ) Delete  
Name: DE FILLIPO, KENNETH A.  
Address: 17830 NE 10TH AVE.  
City-St-Zip: N. MIAMI BEACH, FL 33162

Title: DST ( ) Delete  
Name: OWENS, KENT  
Address: 2520 AIRPORT RD., UNIT 1  
City-St-Zip: REGINASK CANADA, 54N1A3

Title: DV ( ) Delete  
Name: KILANI, JEAN  
Address: 18732 NW 12TH CT.  
City-St-Zip: PEMBROKE PINES, FL 33020

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DV (X) Change ( ) Addition  
Name: WALDHER, KEVIN  
Address: 3690 WHITEFISH STAGE ROAD  
City-St-Zip: KALISPELL, MT 59901

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: KENNETH A DE FILLIPO

DP

01/05/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date