

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000005857

**FILED**  
**Apr 25, 2005**  
**Secretary of State**

**Entity Name:** DOLL ENTERPRISES, INC.

**Current Principal Place of Business:**

7735 NW 146 STREET  
SUITE 300  
MIAMI LAKES, FL 33016 US

**New Principal Place of Business:**

**Current Mailing Address:**

7735 NW 146 STREET  
SUITE 300  
MIAMI LAKES, FL 33016 US

**New Mailing Address:**

**FEI Number:** 65-0489003      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

DINER, MANUEL  
7735 NW 146 STREET  
SUITE 300  
MIAMI LAKES, FL 33016 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: WINIKOR, LEON  
Address: 1751 NE 197 TERRACE  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

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

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

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: LEON WINIKOR

PRES

04/25/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date