

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000081719

Entity Name: DOINK, INC.

FILED
Jan 06, 2005
Secretary of State

Current Principal Place of Business:

117 MAJORCA AVE - SUITE 100
CORAL GABLES, FL 33134 US

New Principal Place of Business:

117 MAJORCA AVE - SUITE 101
CORAL GABLES, FL 33134 US

Current Mailing Address:

117 MAJORCA AVE - SUITE 100
CORAL GABLES, FL 33134 US

New Mailing Address:

117 MAJORCA AVE - SUITE 101
CORAL GABLES, FL 33134 US

FEI Number: 65-0536779

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALDERIN, CHARLES
117 MAJORCE AVE.
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

CALDERIN, CHARLES
117 MAJORCE AVE
SUITE 101
CORAL GABLES, FL 33134 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:

01/06/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CALDERIN, CHARLES
Address: 3101 SW 31 COURT
City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CALDERIN, CHARLES
Address: 8101 SW 81 COURT
City-St-Zip: MIAMI, FL 33143

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: CHARLIE CALDERIN

PD

01/06/2005

Electronic Signature of Signing Officer or Director

Date