

# **2010 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A09000000850

**FILED**  
**Feb 24, 2010**  
**Secretary of State**

**Entity Name:** C-DOMINGUEZ ENTERPRISES, LTD.

**Current Principal Place of Business:**

3614 MONSERRATE STREET  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

3614 MONSERRATE STREET  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 27-1485365

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DOMINGUEZ, CAROL  
3614 MONSERRATE STREET  
CORAL GABLES, FL 33134 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

**GENERAL PARTNER INFORMATION:**

Document #:

Name: DOMINGUEZ, CAROL  
Address: 3614 MONSERRATE STREET  
City-St-Zip: CORAL GABLES, FL 33134

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: DOMINGUEZ, RENE  
Address: 3614 MONSERRATE STREET  
City-St-Zip: CORAL GABLES, FL 33134

Address:  
City-St-Zip:

Document #:

Name: DOMINGUEZ, DAVID  
Address: 3614 MONSERRATE STREET  
City-St-Zip: CORAL GABLES, FL 33134

Address:  
City-St-Zip:

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: CAROL DOMINGUEZ

GP

02/24/2010

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date