

2013 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A09000000850

Entity Name: C-DOMINGUEZ ENTERPRISES, LTD.**Current Principal Place of Business:**3614 MONSERRATE STREET
CORAL GABLES, FL 33134**Current Mailing Address:**3614 MONSERRATE STREET
CORAL GABLES, FL 33134**FEI Number:** 27-1485365**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DOMINGUEZ, CAROL
3614 MONSERRATE STREET
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:**_____
Electronic Signature of Registered Agent_____
Date**General Partner Detail :**

Document

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

Document

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

Document

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

I hereby 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 a general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CAROL DOMINGUEZ**REGISTERED AGENT****01/24/2013**_____
Electronic Signature of Signing General Partner Detail_____
Date