# **2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N0400000899

Entity Name: DORAL BUSINESS COUNCIL, INC.

**FILED** Jan 09, 2014 **Secretary of State** CC6551196391

# **Current Principal Place of Business:**

2315 NW 107 AVE SUITE 1M9 BOX 94 DORAL, FL 33172

# **Current Mailing Address:**

2315 NW 107 AVE SUITE 1M9 BOX 94 DORAL, FL 33172

FEI Number: 42-1617317 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

PANELL, ELIEZER ESQ CPA 7950 N.W. 53RD STREET SUITE 221

DORAL, FL 33166 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

# Officer/Director Detail:

Title	DIRECTOR	Title	DIRECTOR
Name	FERNANDEZ, ARMANDO	Name	CHENG, CHARLES
Address	2315 NW 107 AVE 1M9, BOX 94	Address	2315 NW 107 AVE. 1M9, BOX 94
City-State-Zip:	DORAL FL 33172	City-State-Zip:	DORAL FL 33172
Title	IMMEADIATE PAST CHAIR	Title	CHAIR ELECT
Name	PENALVER, NELSON G	Name	TIMMONS, JASON
Address	2315 NW 107 AVE 1M9, BOX 94	Address	2315 NW 107 AVE 1M9, BOX 94
City-State-Zip:	DORAL FL 33172	City-State-Zip:	DORAL FL 33172
Title	CHAIRMAN	Title	DIRECTOR
Name	PINO, RAUL	Name	JUDE, PETER
Address	2315 NW 107 AVE 1M9, BOX 94	Address	2315 NW 107 AVE 1M9, BOX 94
City-State-Zip:			
City-State-Zip.	DORAL FL 33172	City-State-Zip:	DORAL FL 33172
Title	DORAL FL 33172 TREASURER	City-State-Zip: Title	DORAL FL 33172 DIRECTOR
, ,		, ,	
Title	TREASURER	Title	DIRECTOR

# Continues on page 2

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

01/09/2014 SIGNATURE: RAUL PINO **CHAIRMAN** 

# Officer/Director Detail Continued:

Title DIRECTOR

Name GONZALEZ, MARIA L

Address 2315 NW 107 AVE

1M9, BOX 94

City-State-Zip: DORAL FL 33172

Title DIRECTOR

Address

Name FALERO, MARA

2315 NW 107 AVE 1M9, BOX 94

City-State-Zip: DORAL FL 33172

Title DIRECTOR

Name MARTINEZ, MARIA

Address 2315 NW 107 AVE

1M9, BOX 94

City-State-Zip: DORAL FL 33172

Title DIRECTOR

Name SORA, EFRAIN

Address 2315 NW 107 AVE

1M9, BOX 94

City-State-Zip: DORAL FL 33172

Title DIRECTOR

Name BUESO, MARTI

Address 2315 NW 107 AVE

1M9, BOX 94

City-State-Zip: DORAL FL 33172

Title DIRECTOR

Name DIPIETRO, MICHAEL

Address 2315 NW 107 AVENUE

1M9, BOX 94

City-State-Zip: DORAL FL 33172

Title DIRECTOR

Name RIVERO, JR., CARLOS

Address 2315 NW 107 AVE

1M9, BOX 94

City-State-Zip: DORAL FL 33172