

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 398836

FILED
Mar 07, 2009
Secretary of State

Entity Name: DOLINER'S, INC.

Current Principal Place of Business:

2920 N PENINSULA DR
DAYTONA BEACH, FL 32118

New Principal Place of Business:

Current Mailing Address:

2920 N PENINSULA DR
DAYTONA BEACH, FL 328118

New Mailing Address:

FEI Number: 59-1414388 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOLINER, CELESTE
2920 N PENINSULA DR
DAYTONA BEACH, FL 32118 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: DOLINER, CELESTE
Address: 2920 N. PENINSULA DR.
City-St-Zip: DAYTONA BEACH, FL

Title: VD () Delete
Name: DOLINER, HARRIS
Address: 244 MADISON AVE PHF
City-St-Zip: NEW YORK, NY 10016

Title: SD () Delete
Name: DOLINER, RICHELLE
Address: 2400 NE 9TH ST 503
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: TD () Delete
Name: DOLINER, JOEL
Address: 13900 SW 104TH AVE
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CELESTE DOLINER

PRES

03/07/2009

Electronic Signature of Signing Officer or Director

_____ Date