2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 448231

Entity Name: DOVER INDUSTRIAL CORPORATION

CONCULLUELÁ, BARBARA, A.

2432 SW 102ND AVE.

MIAMI, FL 33165

Name:

Address:

City-St-Zip:

FILED Apr 26, 2007 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
9682 FON' APT, 608	TAINBLEAU BI	LVD.			
MIAMI, FL 33172 US					
Current Mailing Address:			New Mailing Address	New Mailing Address:	
9682 FONTAINBLEAU BLVD.					
APT. 608 MIAMI, FL	33172 US				
FEI Number:	59-1522481	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
POU, GLO 11091 NW APT. 106 MIAMI, FL					
	named entity s of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () ANTON, WILLIA 9682 FONTAINE MIAMI, FL 3317	BLEAU BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () COSCULLUELA 2432 SW 102NI MIAMI, FL 3316	O AVE.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title:	T ()	Delete	Title [.]	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ANTON, WILLIAM R. P 04/26/2007