

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # 653918**

1. Entity Name  
**CANAL DOS CORPORATION**



Principal Place of Business

**2600 S W THIRD AVE  
SUITE 450  
MIAMI, FL 33129**

Mailing Address

**2600 S W THIRD AVE  
SUITE 450  
MIAMI, FL 33129**

**FILED**  
**Jul 18, 2008 08:00 AM**  
**Secretary of State**



07152008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-2165460</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

**ESERSKI, BORIS  
2600 SW THIRD AVE  
SUITE 450  
MIAMI, FL 33129**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00  
Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

U00000955600  
07/18/08-80004-011 550.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ESERSKI, BORIS 2600 SW 3RD AVENUE MIAMI, FL 00000,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NIETO, CARLOS RAFAEL CARRETERA PANAMERICANA SAN SALVADOR, EL SALVADOR, OC
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AGUILAR, CARLOS CARRETERA PANAMAERICANA SAN SALVADOR, EL SALVADOR, OC
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE \_\_\_\_\_

*Boris Eserki*

*Boris Eserki*

*7/15/08*

*305-446-3161*