2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Sep 20, 2007
Secretary of State

DOCUMENT# 658922

Entity Name: DOTOLO RESEARCH CORP.

Current Principal Place of Business:

970 HARBOR LAKE DR
SUITE A
SAFETY HARBOR, FL 34695

New Principal Place of Business:

Current Mailing Address:

970 HARBOR LAKE DR
SUITE A
SAFETY HARBOR, FL 34695

New Mailing Address:

FEI Number: 59-1995239 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DOTOLO, RAYMOND
970 HARBOR LAKE DR
SUITE A
SAFETY HARBOR, FL 34695 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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: DOTOLO, RAYMOND
Address: 970 HARBOR LAKE DRIVE STE A
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D ( ) Delete
Name: DOTOLO, JOHN
Address: 970 HARBOR LAKE DRIVE STE A
City-St-Zip: SAFETY HARBOR, FL 34695

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: DOTOLO, CONNIE
Address: 970 HARBOR LAKE DRIVE STE A
City-St-Zip: SAFETY HARBOR, FL 34695

Title: TR ( ) Change (X) Addition
Name: DOTOLO, DEBRA
Address: 970 HARBOR LAKE DRIVE STE A
City-St-Zip: SAFETY HARBOR, FL 34695

Title: VP ( ) Change (X) Addition
Name: SOLOMON, MAURY
Address: 10199 W VAN BUREN, SUITE 10
City-St-Zip: TOLLESON, AZ 85353

Title: SEC ( ) Change (X) Addition
Name: SOLOMON, JULIE
Address: 10199 W VAN BUREN, SUITE 10
City-St-Zip: TOLLESON, AZ 85353

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: RAYMOND DOTOLO PD 09/20/2007

Electronic Signature of Signing Officer or Director — Date