## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 29, 2005 08:00 AM Secretary of State

1. Entity Nam	MENT # F24680 DONATO, INC.			Secretary of State
8700 N.W. 5	e of Business 3 3RD COURT NGS, FL 33067	Mailing Address 8700 N.W. 53RD COURT CORAL SPRINGS, FL 33067		i jaakkuu siisi iloli olole viini tulii esti kisii vibii oldii oldii bisii sibiisteli iloli
E	OO NOT WRITE		CE	04192005 No Chg-P CR2E034 (10/03)  4. FEI Number
6. Name and Address of Current Registered Agent  DONATO, ROBERT 5236 N.W. 15TH ST. MARGATE, FL 33063				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 the fiscolicable. (NOTE Registered Agent signature required when relessating)  DATE  FILE NOWILL FEE IS \$150.00.  9. Election Campaign Financing \$5.00 May 89				
After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution				led to Fees 04/29/05-80046-014 150.00
10.  THILE  NAME  STREET ADORESS  CITY - ST- ZIP	PD DONATO, ROBERT 5230 NW 15TH STREET MARGATE, FL	inectons		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Park A Calabatta Calabata	
NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP			* ************************************	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
12. I hereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(1), 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: ALUT CONTACT ROLENT DO INATO PRESIDENT 4-22-05-954547 9046
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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