2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# H17036

Entity Name: DONMAR ENTERPRISES, INC.

Current Principal Place of Business:

C/O KAL LEVINSON
7980 BAYBERRY ROAD
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

C/O KAL LEVINSON
7980 BAYBERRY ROAD
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 59-2435761 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEVINSON, KAL
2255 MILLER OAKS DRIVE SOUTH
JACKSONVILLE, FL 32217 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: LEVINSON, KAL
Address: 2255 MILLER OAKS DR SO.
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete
Name: LEVINSON, JUDITH
Address: 2255 MILLER OAKS DR SO.
City-St-Zip: JACKSONVILLE, FL

Title: SD ( ) Delete
Name: LEVINSON, MARC
Address: 3413 CATAMARAN WAY
City-St-Zip: JACKSONVILLE, FL 32223

Title: TD ( ) Delete
Name: LEVINSON, DON
Address: 3413 CATAMARAN WAY
City-St-Zip: JACKSONVILLE, FL 32223

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: DON LEVINSON TD 04/27/2007

Electronic Signature of Signing Officer or Director — Date