

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# H17036

FILED  
Nov 01, 2009  
Secretary of State

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:

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

## Current Mailing Address:

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

## New Mailing Address:

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

FEI Number: 59-2435761

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## 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:

LEVINSON, DON  
7980 BAYBERRY ROAD  
JACKSONVILLE, FL 32256 US

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: DON LEVINSON

11/01/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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: P.O. BOX 23223  
City-St-Zip: JACKSONVILLE, FL 32241

## 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

11/01/2009

Electronic Signature of Signing Officer or Director

Date