

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L89999

Entity Name: DONALGA, INC.

FILED  
Jul 21, 2009  
Secretary of State

## Current Principal Place of Business:

999 PONCE DE LEON BOULEVARD  
625  
CORAL GABLES, FL 33134 US

## Current Mailing Address:

999 PONCE DE LEON BOULEVARD  
625  
CORAL GABLES, FL 33134 US

## New Principal Place of Business:

999 PONCE DE LEON BOULEVARD  
625  
CORAL GABLES, FL 33134 US

## New Mailing Address:

FEI Number: 65-0211441      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROSENTHAL, ALAN  
999 PONCE DE LEON BOULEVARD  
625  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

ROSENTHAL, ALAN  
4000 INTERNATIONAL PLACE  
100 S.E. SECOND STREET  
MIAMI, FL 33131-211 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:

07/21/2009

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: P ( ) Delete  
Name: ROSENTHAL, HERSCHEL  
Address: 600 TIZIANO  
City-St-Zip: CORAL GABLES, FL

Title: V ( ) Delete  
Name: ROSENTHAL, ALAN  
Address: 999 PONCE DE LEON BOULEVARD  
City-St-Zip: CORAL GABLES, FL 33134

Title: V ( ) Delete  
Name: ROSENTHAL, DON  
Address: 10520 SW 122ND STREET  
City-St-Zip: MIAMI, FL

Title: T ( ) Delete  
Name: APPELROUTH, GAIL R.  
Address: 8290 SW 114TH ST.  
City-St-Zip: MIAMI, FL

## 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: GAIL R. APPELROUTH

T

07/21/2009

Electronic Signature of Signing Officer or Director

Date