


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90232 033 ****70.00

DOCUMENT # N01000002028

1. Entity Name
DORAL ACADEMY HIGH SCHOOL, INC.



Principal Place of Business
**11100 NW 27TH STREET
 MIAMI, FL 33172 US**

Mailing Address
**6255 BIRD ROAD
 MIAMI, FL 33155 US**

50016892



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

04052006 Chg-NP CR2E037 (11/05)

City & State
 Zip Country

4. FEI Number
65-1115240

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ZULUETA, IGNACIO G ESQ.
 6255 BIRD ROAD
 MIAMI, FL 33155**

7. Name and Address of New Registered Agent

Name **NRAI Services, Inc**

Street Address (P.O. Box Number is Not Acceptable)
2731 Executive Park Drive Suite 4

City **Weston** **FL** Zip Code **33331**

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  **4/7/06**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

**Filing Fee is \$61.25
 Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACQUINET, ALEJANDRA S 4475 NAUTILUS DRIVE MIAMI BEACH, FL 33140 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALVAREZ, GABRIELLE 10450 NE 48TH STREET MIAMI, FL 33178 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRESEN, MILLIE 1412 EL RADO STREET CORAL GABLES, FL 33134 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC BARROSO, VICTOR 12583 SW 119TH PLACE MIAMI, FL 33186 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GOMEZ, ILEANA 2450 NW 97TH AVENUE MIAMI, FL 33172 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARBONELL, ANA 193 CORYDON DRIVE MIAMI SPRINGS, FL 33166 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCP Barroso, Victor 1228 West Avenue #1405 Miami Beach, FL 33139 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Carbonell, Ana 193 Corydon Drive Miami Springs, FL 33166 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jacquinet, Alejandra Salima 4475 Nautilus Drive Miami Beach, FL 33140 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Alvarez, Gabrielle 10450 NW 48th Street Miami, FL 33178 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Rovirosa, Rene 7901 NW 103rd Street Hialeah Gardens, FL 33016 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Jimenez, Frank 11100 NW 27th Street Miami, FL 33172 <input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, 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:  **4-6-06** **305-664-2900**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

~~50016890~~
#NO 1000002028

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2006 Not-For-Profit Corporation
Annual Report

(cont.)

Doral Academy High School, Inc.

Officers and Directors

7.

Title	S
Name	Mallon Linaje, Kelly
Street Address	6255 Bird Road
City-St-Zip	Miami, FL 33155

8.

Title	T
Name	Martinez, Ana
Street Address	6255 Bird Road
City-St-Zip	Miami, FL 33155