## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # N01000002028** 1. Entity Name
DORAL ACADEMY HIGH SCHOOL, INC.



FILED
May 11, 2007 8:00 am
Secretary of State
05-11-2007 90034 001 \*\*\*\*61.25

							TSI	. 43.738			
Principal Place of Business 11100 NW 27TH STREET MIAMI, FL 33172 US			Mailing Address 6255 BIRD ROAD MIAMI, FL 33155 US					40111520			
			,								
2. Principal Place of Business - No P.O. Box # 3. N			3. Mai	failing Address							
Suite, Apt. #, etc.			St	Suite, Apt. #, etc.				04232007 Chg	g-NP CI	R2E037 (12/06)	
City & State			Ci	City & State				4. FEI Number 65-1115240	 )	<del></del>	plied For t Applicable
Zip	Zip Country		Ži	Zip Cour				5. Certificate of Status Desired S8.75 Additional Fee Required			
6. Name and Address of Current R			Realster	stered Agent				7. Name and Addre	ess of New Regis		•
NRAI SERVICES, INC 2731 EXECUTIVE PARK DRIVE SUITE 4						Street Address (P.O. Box Number is Not Acceptable)					
WESTON, FL 33331											
					City				FL Zip Code	9	
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 title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE											
Filing Fee is \$61.25 Due by May 1, 2007				9. Election Car Trust Fund C			\$5.00 May Be Added to Fees		check payable to Department of St		
10.		OFFICERS AND DIF	RECTORS		11.		, ,	ADDITIONS/CHANGE	S TO OFFICERS A	ND DIRECTORS IN	10 ,
TITLE	D	•		☐ Delete	TITLE		DIREC	TOR		☐ Change	Addition
NAME	JACQUINET, ALEJANDRA S			NAMI			ANGE	LA RAMOS	_		
STREET ADDRESS CITY-ST-ZIP	4475 NAUTILUS DRIVE MIAMI BEACH, FL 33140					ET ADDRESS -ST-ZIP	9405	NW 41 STREET	a		,
TITLE	D	AO11, FE 33140		Delete	TITLE		MLA1 VP	MI, FL 3317	<u>v</u>	Change	F 1 Addition
NAME	ALVAREZ, GABRIELLE			LEJ Delete	NAMI			TIMENEZ.		. Urange	Addition
STREET ADDRESS	10450 NE 48TH STREET			STRE		ET ADDRESS	11100 NW 27 STREET			•	
CITY-ST-ZIP	MIAMI, FL 33178			CITY		-ST-ZIP	1	MIAMI, PL 33172			,
TITLE	DVCS			☐ Delete TITLE				FURER		☐ Change	Addition
NAME	ROVIROSA, RENE		NAM		E	OFEL	FELLA ALVAREZ				
STREET ADDRESS	7901 NW 103RD ST.				ET ADDRESS	2601	DI NW 112 AVENUE				
CITY-ST+ZIP		GARDENS, FL 33016			CITY	-ST-ZIP	MIA	MI, FL 33172	<u></u>		
TITLE	PCD	,		Delete	TITLE					☐ Change	☐ Addition
NAME STREET ADDRESS	BARROSC				NAM						
CITY-ST-ZIP	12583 SW 119TH PLACE MIAMI, FL 33186					et address -St-Zip					
TITLE	VP	00.00		☐ Delete	TITLE					☐ Change	Addition
NAME	GOMEZ, II	LEANA		C Delete	NAMI					C) Orlange	
STREET ADDRESS					et address						
CITY-ST-ZIP	MIAMI, FL			,		-ST-ZIP					
TITLE	D			Delete	TITLE					☐ Change	Addition
NAME	CARBONE	ELL, ANA			NAM	E	1			- •	-
STREET ADDRESS	193 CORY	DON DRIVE			STRE	et address					
CITY-ST-ZIP MIAMI SPRINGS, FL 33166					CITY	-ST-ZIP					
12. I hereby	pertify that the	information supplied with	this filing	does not qualify for	r the exe	mptions c	ontained	in Chapter 119, Florid	da Statutes. I furth	er certify that the in	formation

only only and the morning supplies with this limit does not quality for the exemptions contained in Chapter 119. Horida Statutes. I further certify that the information indicated on this report or suppliemental 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 of 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:

VICTOR BAMO SO
TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR