2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# N05000002549

Entity Name: ROTARY CLUB OF DORAL, INC.

Current Principal Place of Business:

1565 N.W. 88TH AVENUE
UNIT C
DORAL, FL 33172

New Principal Place of Business:

Current Mailing Address:

2441 NW 93 AVENUE
SUITE 101
DORAL, FL 33172

New Mailing Address:

FEI Number: 20-2581231 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MESA & MESA ACCOUNTING & TAX SERVICES
2441 NW 93 AVE
SUITE 101
DORAL, FL 33172 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

OFFICERS AND DIRECTORS:

Title: D/VP ( ) Delete
Name: PALOMO, GUILLERMO
Address: 2654 NW 97 AVE
City-St-Zip: DORAL, FL 33172

Title: D/P ( ) Delete
Name: GARCIA, JOSE R
Address: 1565 N.W. 88TH AVENUE, UNIT C
City-St-Zip: DORAL, FL 33172

Title: D/PE ( ) Delete
Name: WOLFF, CLAUS P
Address: 1565 N.W. 88TH AVENUE, UNIT C
City-St-Zip: DORAL, FL 33172

Title: D/T ( ) Delete
Name: MESA, MICHAEL
Address: 2441 NW 93 AVE SUITE 101
City-St-Zip: DORAL, FL 33172

Title: D/S ( ) Delete
Name: NOMICOS, ZAFEIRIA
Address: 1565 N.W. 88TH AVENUE, UNIT C
City-St-Zip: DORAL, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D/PE (X) Change ( ) Addition
Name: PEREZ, JULIANA
Address: 1565 N.W. 88TH AVENUE, UNIT C
City-St-Zip: DORAL, FL 33172

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D/S (X) Change ( ) Addition
Name: MOLINA-BAEZ, RAYMUNDO
Address: 1565 N.W. 88TH AVENUE, UNIT C
City-St-Zip: DORAL, FL 33172

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GUILLERMO PALOMO D/VP 04/29/2009

Electronic Signature of Signing Officer or Director — Date