

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004921

FILED  
Jan 30, 2007  
Secretary of State

Entity Name: DORAL BRONCOS, INC.

## Current Principal Place of Business:

P O BOX 650698  
MIAMI, FL 33265

## New Principal Place of Business:

11555 NW 58TH STREET  
MIAMI, FL 33178

## Current Mailing Address:

P O BOX 650698  
MIAMI, FL 33265

## New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REYES, ROLANDO  
12781 SW 135 TERR  
MIAMI, FL 33186 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: VP ( ) Delete  
Name: RODRIGUEZ, HECTOR  
Address: P O BOX 650698  
City-St-Zip: MIAMI, FL 33275

Title: P ( ) Delete  
Name: JOSE, CARTELLE  
Address: 455 ALT 19 SOUTH K179  
City-St-Zip: PALM HARBOR, FL 34683

Title: P ( ) Delete  
Name: SAMMY, DOMINGUEZ  
Address: P O BOX 650698  
City-St-Zip: MIAMI, FL 33265

Title: P ( ) Delete  
Name: CARY, DOMINGUEZ  
Address: P O BOX 650698  
City-St-Zip: MIAMI, FL 33265

Title: P ( ) Delete  
Name: TALLY, JETER  
Address: P O BOX 650698  
City-St-Zip: MIAMI, FL 33265

Title: P ( ) Delete  
Name: LYMARIE, CARTELLE  
Address: P O BOX 650698  
City-St-Zip: MIAMI, FL 33265

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change ( ) Addition  
Name: JUSTIN, REYES  
Address: P O BOX 650698  
City-St-Zip: MIAMI, FL 33265

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

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

Title: P (X) Change ( ) Addition  
Name: SHELTON, REYES  
Address: P O BOX 650698  
City-St-Zip: MIAMI, FL 33265

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ROLANDO REYES

P

01/30/2007

Electronic Signature of Signing Officer or Director

Date