

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000008802

**FILED**  
**Jul 07, 2010**  
**Secretary of State**

**Entity Name:** DOMA KINGDOM ALLIANCE, INC.

**Current Principal Place of Business:**

6175 NW 167TH ST., SUITE G-14  
MIAMI LAKES, FL 33015

**New Principal Place of Business:**

**Current Mailing Address:**

6175 NW 167TH ST., SUITE G-14  
MIAMI LAKES, FL 33015

**New Mailing Address:**

**FEI Number:** 27-0924592

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MCKENZIE, E.J.  
6175 NW 167TH ST., SUITE G-14  
MIAMI LAKES, FL 33015 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:** PD  
**Name:** MCKENZIE, E.J.  
**Address:** 6175 NW 167TH ST., SUITE G-14  
**City-St-Zip:** MIAMI LAKES, FL 33015

**Title:** VD  
**Name:** GAY, ALONZO T SR.  
**Address:** 6175 NW 167TH ST., SUITE G-14  
**City-St-Zip:** MIAMI LAKES, FL 33015

**Title:** TD  
**Name:** ELUETT, FRANK  
**Address:** 3965 NW 37TH TERR. HOUSE  
**City-St-Zip:** LAUDERDALE LAKES, FL 33309

I hereby 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 all other like empowered.

**SIGNATURE:** EJ MCKENZIE

PD

07/07/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date