

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000007027

FILED  
Feb 24, 2012  
Secretary of State

**Entity Name:** DOMINGUEZ GROUP HOME INSTITUTE, CORPORATION

**Current Principal Place of Business:**

3691 NW 124TH AVE.  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

3691 NW 124TH AVE  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

3691 NW 124TH AVE.  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

3691 NW 124TH AVE  
CORAL SPRINGS, FL 33065

**FEI Number:** 45-2840366

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KNEZEVIC, ANA MARIA  
3691 NW 124TH AVE.  
CORAL SPRINGS, FL 33065 US

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

KNEZEVIC, ANA M  
3691 NW 124TH AVE.  
CORAL SPRINGS, FL 33065 US

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: ANA KNEZEVIC

02/24/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: DOMINGUEZ, ALEX  
Address: 5811 NW 72 WAY  
City-St-Zip: PARKLAND, FL 33067

Title: VPD  
Name: CHEUNG, KIMBALLEE  
Address: 11305 NW 38 STREET  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: TSD  
Name: SAMOUR, ANITA  
Address: 5149 ROSEN BLVD.  
City-St-Zip: BOYNTON BEACH, FL 33472

Title: AD  
Name: KNEZEVIC, ANA M  
Address: 3611 TURTLE RUN BLVD APT 625  
City-St-Zip: CORAL SPRINGS, FL 33065

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: ALEX DOMINGUEZ

PD

02/24/2012

Electronic Signature of Signing Officer or Director

Date