2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2005
Secretary of State

DOCUMENT# N30544

Entity Name: DOMINICAN FATHERS OF MIAMI, INC.

Current Principal Place of Business:

C/O JORGE PRESMANES
5909 NW 7TH ST.
MIAMI, FL 33126 US

New Principal Place of Business:

Current Mailing Address:

C/O JORGE PRESMANES
5909 NW 7TH ST.
MIAMI, FL 33126 US

New Mailing Address:

FEI Number: 65-0098330 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WEDIG, MARK
5909 NW 7ST
MIAMI, FL 33126 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: EOD ( ) Delete
Name: OBRIEN, SCOTT
Address: 5909 NW 7TH STREET
City-St-Zip: MIAMI, FL

Title: TD ( ) Delete
Name: PRESMANES, JORGE L.,
Address: 5909 NW 7TH ST
City-St-Zip: MIAMI, FL

Title: PD ( ) Delete
Name: WEDIG, MARK
Address: 5909 N.W. 7TH ST.
City-St-Zip: MIAMI, FL

Title: VTD ( ) Delete
Name: PEREZ, RESTITUTO
Address: 5909 NW 7ST
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 Section 119.07(3)(i), 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: JORGE PRESMANES TD 07/08/2005

Electronic Signature of Signing Officer or Director — Date