

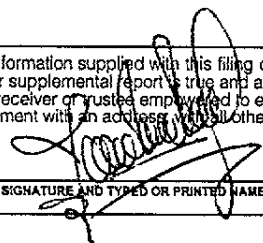


**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 24, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N99000003470</b>			
1. Entity Name DORAL BUSINESS PARK CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 8328 NW 30TH TERRACE MIAMI, FL 33122	Mailing Address 8328 NW 30TH TERRACE MIAMI, FL 33122		
<b>DO NOT WRITE IN THIS SPACE</b>			
		04222006 No Chg-NP CR2E037 (11/05)	
		4. FEI Number 65-0935223	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  PALSTER, ROBERT 8328 NW 30TH TERRACE MIAMI, FL 33122		<b>DO NOT WRITE IN THIS SPACE</b>	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	DATE 05/06/06-80020-022 61.25
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD PLASTER, ROBERT 8328 NW 30TH TERRACE MIAMI, FL 33122		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD AHREND, HEINZ 8300 NW 30TH TERR. MIAMI, FL 33122		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD PEREZ, JAVIER 8348 NW 30TH TERR. MIAMI, FL 33122		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DO NOT WRITE IN THIS SPACE</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 employed to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, without other like empowered.			
SIGNATURE: 		4/23/06 305-593-0845	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	