


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2007 8:00 am
Secretary of State

05-11-2007 90034 002 ****61.25

DOCUMENT # N99000003576

1. Entity Name
THE DORAL ACADEMY, INC.



Principal Place of Business
**2450 NW 97TH AVE.
 MIAMI, FL 33172**

Mailing Address
**6255 BIRD RD
 MIAMI-DADE, FL 33155**

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 Zip Country

40111249



04232007 Chg-NP CR2E037 (12/06)

4. FEI Number
65-0944569

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**NRAI SERVICES, INC
 2731 EXECUTIVE PARK DRIVE
 SUITE 4
 WESTON, FL 33331**

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
 Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

**Make check payable to
 Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCP BARROSO, VICTOR 1228 WEST AVE., #1405 MIAMI BEACH, FL 33139	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARBONELL, ANA 193 CORYDON DR MIAMI SPRINGS, FL 33166	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACQUINET, SALIMA A 4475 NAUTILUS DR MIAMI BEACH, FL 33140	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALVAREZ, GABRIELLE 10450 NW 48TH ST MIAMI, FL 33178	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVCS ROVIROSA, RENE 7901 NW 103RD ST. HIALEAH GARDENS, FL 33016	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GOMEZ, ILEANA 2450 NW 97TH AVE MIAMI, FL 33172	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR ANGELA RAMOS 9405 NW 41 STREET MIAMI, FL 33178	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FRANK JIMENEZ 11100 NW 27 STREET MIAMI, FL 33172	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER OFELIA ALVAREZ 2601 NW 112 AVENUE MIAMI, FLORIDA 33172	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 empowered 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, with all other like empowered.

SIGNATURE: Victor Barroso 4/27/07 (305) 669-2906
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT
DORAL ACADEMY, INC.
DORAL ACADEMY HIGH SCHOOL, INC.

40111249

#199000003576

Board Members & Officers

Victor Barroso, Director / President / Chair (D/P/C)
12583 SW 119th Place
Miami, FL 33186
Victorb99@gmail.com
(305) 345-5289

Rene Rovirosa, Director / Vice Chair / Secretary (D/S)
7901 NW 103rd Street
Hialeah Gardens, FL 33016
rrovirosa@dadeschools.net
(305) 796-2243

Alejandra Salima Jacquinet, Director (D)
4475 Nautilus Drive
Miami Beach, Florida 33140
dilcras@aol.com
(786) 489-0421

Angela Ramos, Director (D)
9405 NW 41st Street
Miami, FL 33178
aramos@UNIVISION.NET
(786) 282-2264
Elected: 9/12/06

***Ileana Gomez**, Vice-President (Doral Academy, Inc. Only) (VP)
2450 NW 97th Avenue
Miami, Florida 33172
doralprincipal@yahoo.com
(305) 597-9999

***Frank Jimenez**, Vice-President (VP)
11100 NW 27th Street
Miami, Florida 33172
fjimenez25@hotmail.com
(305) 597-9950

***Ofelia Alvarez**, Treasurer (T)
2601 NW 112th Avenue
Miami, FL 33172
Ofcalvarez4@dadeschools.net
(305) 591-0020

***No Voting Privileges / Corporate Officer Only**

Abbreviations for Corporation Annual Report

D- Director
P- President
C- Chair
V- Vice President
T- Treasurer
S- Secretary