2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2005 08:00 AM Secretary of State

NAME STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33131 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33131 NAME BATISTA UAMAS, ADOLFO STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33131 NAME BATISTA UAMAS, ADOLFO STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33131 NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME CHANGE NAME STREET ADDRESS CITY-ST-ZIP NAME NAME STREET ADDRESS CITY-ST-ZIP NAME NAME CHANGE CITY-ST-ZIP NAME CHANGE NAME CHANGE CITY-ST-ZIP NAME CHANGE CITY-ST-ZIP NAME CHANGE CITY-ST-ZIP NAME CITY-ST-Z	DOCUMENT # P01000048713 1. Entity Name DORADO 413 INC.								Secret	ary o	of Sta	té
Suita, Apt. 4, etc.	520 BRICKE	LL KEY DRIVE S	UITE 0-305	520 BRICKELL KEY D	520 BRICKELL KEY DRIVE SUITE 0-305			21 48 6 8	s'a'		iii füürü ji ggu ji)))==) (†25 1
City & State	2. Principal F	Place of Business	<u>, , , , , , , , , , , , , , , , , , , </u>	3. Mailing Address			-					
TRANSCLOBAL CORPORATE ADMINISTRATION, LLC Street Academis St	Suite, Apt. #, etc.			Suite, Apt. #, etc.			03182	005	Chg-P	CR2E0	34 (10/03)	
S. Certificate of Status Desired Sub-Projection Sub-P	City & State			City & State								··-
Name Street Address (P.C. Box Number is Not Acceptable) Street Address (P.C. Bo	Zip	-			Cour	ntry	5. Certi	ficate o	Status Desired			
TRANSCLOBAL CORPORATE ADMINISTRATION, LLC S20 BRICKELL KEY DRIVE SUITE 0-305 MIAMI, FL 33131 8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Rodda. I am familiar with, and accept the obligations of registered agent. SIGNATURE FILE NOWILL FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE OBARCIA, JUAN GONZALEZ SIREM AURIES S20 BRICKELL KEY DRIVE SUITE 0-305 MIAMI, FL 33131 TITLE OPARITY ST-2P MIAMI, FL 33131 TITLE OBelde TITLE OBelde TITLE OBERCTORES ORY-ST-2P TITLE MAKE SIRET AURIESS ORY-ST-2P AURIES AURIES ORY-ST-2P AURIES ORY-ST-2P AURIES ORY-ST-2P AURIES SIRET AURIESS ORY-ST-2P AURIES ORY-ST-2P AURIES ORY-ST-2P AURIES ORY-ST-2P AURIES SIRET AURIES ORY-ST-2P AURIES SIRET AURIES ORY-ST-2P AURIES ORY-ST-2P AURIES ORY-ST-2P AURIES SIRET AURIES ORY-ST-2P AURIES SIRET AURIES ORY-ST-2P AURIES		6. Name an	d Address of Current I	Registered Agent		Namo	7. Nam	and A	ddress of New P	egistered /	\gent	
8. The above named entity submits this statement for the purpose of changing its registered either obligations of registered agent. SIGNATURE File NOW!!! FEE IS \$150.00	520 BRICKELL KEY DRIVE SUITE 0-305						Address (P.O. Box Number is Not Acceptable)					
8. The above named entity submits this statement for the purpose of changing its registored office or registored agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature	WILMINI, I'L	33131				Ctu					1 7 6	
THE NOW!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550,00 9. Election Campaign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. TITLE DARCES SUBRICKELL KEY DRIVE SUITE 0-305 WIAMI, FL 33131 WP BATISTA UAMAS, ADOLFO BRIEF MORESS CITY-ST-ZIP WILL NAME STREET ADDRESS CITY-ST-ZIP WILL NAME STREE											ł .	
Signature Sign	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.											
### After Way 1, 2005 Fee will be \$550.00 10.												
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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 peculiar or trustee empowered to execute this report as required by Chapter 607, 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:

ADOLFO BATISTA 04/22/05 (305) 374.38.00