FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000090607

1. Entity Name

Donan Corporation

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1024 W Oakland Park Blvd	1024 W Oakland Park Blvd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Wilton Manors	City & State: Wilton Manors
Zip: 33311 Country: Broward	Zip: 33311 Country: Broward

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1148698 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Mirian Yolanda Donan

Street Address (P.O. Box Number is Not Acceptable)

1024 W Oakland Park Blvd

City: Wilton Manors FL Zip Code: 33311

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: 03-15-06

Signature required of named registered agent and title if applicable. NOTE: Registered Agent signature required when filing.

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Mirian Yolanda Donan / President 1024 W Oakland Park Blvd Wilton Manors, Fl 33311
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Oscar S Donan / Vice-President 1024 W Oakland Park Blvd Wilton Manors, Fl 33311
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CR2E034B (12/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Miriam T. Donan 03-15-06 (954) 564-4646

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #