

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000040555

FILED  
Apr 01, 2004  
Secretary of State

Entity Name: DORAL CELLULAR, CORP.

## Current Principal Place of Business:

10773 N.W. 58 ST.  
SUITE 202  
MIAMI, FL 33178

## New Principal Place of Business:

5511 NW 112 AVE  
SUITE 110  
MIAMI, FL 33178

## Current Mailing Address:

10773 N.W. 58 ST.  
SUITE 202  
MIAMI, FL 33178

## New Mailing Address:

5511 NW 112 AVE  
SUITE 110  
MIAMI, FL 33178

FEI Number: 04-3643602

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VARELA, ALEJANDRO  
10773 N.W. 58 ST.  
SUITE 202  
MIAMI, FL 33178

## Name and Address of New Registered Agent:

VARELA, ALEJANDRO  
5511 NW 112 AVE  
SUITE 110  
MIAMI, FL 33178

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: ALEJANDRO VARELA

04/01/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: VARELA, ALEJANDRO  
Address: 10773 N.W. 58 ST.  
City-St-Zip: MIAMI, FL 33178

Title: D ( ) Delete  
Name: MORALES, THARINE  
Address: 10773 NW 58 ST  
City-St-Zip: MIAMI, FL 33178

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: VARELA, ALEJANDRO  
Address: 5511 NW 112 AVE  
City-St-Zip: MIAMI, FL 33178

Title: D (X) Change ( ) Addition  
Name: MORALES, THARINE  
Address: 5511 NW 112 AVE  
City-St-Zip: MIAMI, FL 33178

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALEJANDRO VARELA

DP

04/01/2004

Electronic Signature of Signing Officer or Director

Date