2006 ~~ANNUAL REPORT~~ REINSTATEMENT

DOCUMENT # P02000043778

1. Entity Name

Dolores Export & Marketing Inc

APPROVED AND FILED

06 MAY -8 PM 1:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business / Mailing Address

8814 N. knob Nab Road
Bldg 2, Suite 306
Tamarac, Fl 33321

REINSTATEMENT 03-06 DSC

04232005 No Chg-P CR2E05F(10/05)

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4. FEI Number 13-4206694 ☐ Applied For ☐ Not Applicable

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

5. Name and Address of Current Registered Agent

Rafael J. Rodriguez
701 N. State Rd 7
Hollywood, Fl 33021

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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 Rafael J Rodriguez

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

FILE NOW!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	P STD
NAME	Dolores Bastos
STREET ADDRESS	8814 W. knob Nab Rd. Bldg 2
CITY-ST-ZIP	Tamarac Fl 33321 Ste 306
TITLE	VP
NAME	Dolores Rogue
STREET ADDRESS	8814 N knob Nab Rd. Bldg 2 Ste 306
CITY-ST-ZIP	Tamarac, Fl 33321
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

300075269053
05/25/06--01018--022 **600.00

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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Dolores Bastos February 9 - 2006

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