### 2007 FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT # P03000025030

1. Entity Name

DORADO HOMES DEVELOPMENT, INC.



FILED
Jan 11, 2007 08:00 AM
Secretary of State

Principal Place of Business

8700 WEST FLAGLER ST

SUITE 355 MIAMI, FL 33174 Mailing Address

8700 WEST FLAGLER ST SUITE 355

MIAMI, FL 33174



### DO NOT WRITE IN THIS SPACE

01032007 No

No Chg-P

CR2E034 (11/05)

4. FEI Number 13-4241159 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

REGISTERED AGENTS OF FLORIDA, LLC 100 S.E. SECOND STREET SUITE 2900 MIAMI, FL 33131

## DO NOT WRITE IN THIS SPACE

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.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

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U00000583558

01/11/07-80074-022 150.00

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

l	10.	OFFICERS AND DIRECTORS
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GUTIERREZ, ARIEL E 8700 WEST FLAGLER STREET, SUITE 355 MIAMI, FL 33174
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS DAVILA, JORGE L 8700 WEST FLAGLER STREET, SUITE 355 MIAMI, FL 33174
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RODRIGUEZ, MICHAEL 8700 WEST FLAGLER STREET, SUITE 355 MIAMI, FL 33174
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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# DO NOT WRITE IN THIS SPACE

12. Thereby 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 trusteelempowered 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 unit an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS

Ariel E. Gutierrez/President

01/03/2007

305 553-8911

Daytime Phone #