

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000032056

Entity Name: CIUDAD DORAL CORP

FILED
Sep 23, 2009
Secretary of State**Current Principal Place of Business:**10400 NW 33RD STREET SUITE 270
SUITE 270
DORAL, FL 33178 US**New Principal Place of Business:****Current Mailing Address:**10400 NW 33RD STREET SUITE 270
SUITE 270
DORAL, FL 33178 US**New Mailing Address:**

FEI Number: 56-2334528

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:USA BUSINESS CONSULTING GROUP, CORP.
11890 SW 8TH STREET PH 7
PENTHOUSE VII
MIAMI, FL 33184 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: P () Delete
Name: ALCALA, LUIS E
Address: 10400 NW 33RD STREET SUITE 270
City-St-Zip: DORAL, FL 33178 USTitle: VP (X) Delete
Name: GARAVITO, ALEJANDRA
Address: 10400 NW 33RD STREET SUITE 270
City-St-Zip: DORAL, FL 33178**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LUIS ALCALA

PD

09/23/2009

Electronic Signature of Signing Officer or Director

Date