


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 21, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000021108 1. Entity Name DONATO'S SERVICES, INC.	
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Principal Place of Business 2632 AURORA RD UNIT S MELBOURNE, FL 32935	Mailing Address 2082 LANSING STREET MELBOURNE, FL 32935
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DO NOT WRITE IN THIS SPACE



05192006 No Chg-P CR2E034 (11/05)

4. FEI Number 71-0960739	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MEDINA, NEFTALI
2082 LANSING STREET
MELBOURNE, FL 32935**

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 *Neftali Medina Cruz* / *Neftali Medina* *5/19/06*
(Signature, typed or printed name of registered agent and the if applicable (NOTE: Registered Agent signature required when resigning))

FILE NOW!!! FEE IS \$150.00 Due by September 8, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MEDINA, NEFTALI 2082 LANSING STREET MELBOURNE, FL 32935
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CRUZ, GINORIS 2082 LANSING STREET MELBOURNE, FL 32935
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06/21/06-80004-008 158.75

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12. I hereby 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 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: *Neftali Medina Cruz* *5/19/06* *(321) 259-3430*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #