2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2008 08:00 A
Secretary of State

DOCUMENT # P04000033756

1. Entity Name
DONSEG FLORIDA CORP.

Principal Place of Business	Mailing Address
799 CRANDON BLVD #305 KEY BISCAYNE, FL 33149	799 CRANDON BLVD #305 KEY BISCAYNE, FL 33149

DO NOT WRITE IN THIS SPACE

01252008 No Chg-P CR2E034 (11/05)

4. FEI Number
20-1616539
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ARAZOZA & FERNANDEZ-FRAGA, P.A.
2100 SALZEDO STREET STE 300
CORAL GABLES, FL 33134

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

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	DON-ZABALA, ERASMO
STREET ADDRESS	CONDOMINO PUERTO PASEOS AVE LAS CUMBRES 38
CITY-ST-ZIP	SAN JUAN PR 00926-6658,
TITLE	DS
NAME	SEGARRA, MARIA Y
STREET ADDRESS	CONDOMINO PUERTO PASEOS AVE LAS CUMBRES 38
CITY-ST-ZIP	SAN JUAN PR 00926-6658,
TITLE	D
NAME	DON-SEGARRA, MARIETTA
STREET ADDRESS	CONDOMINO PUERTO PASEOS AVE LAS CUMBRES 38
CITY-ST-ZIP	SAN JUAN PR 00926-6658,
TITLE	D
NAME	DON-SEGARRA, ERIK
STREET ADDRESS	2501 BRICKELL AVE #1101
CITY-ST-ZIP	MIAMI, FL 33129
TITLE	D
NAME	MARTINEZ, YOLANDA D
STREET ADDRESS	727 CRANDON BLVD #201
CITY-ST-ZIP	KEY BISCAYNE, FL 33149
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000856112
03/27/08-80078-011 150.00

DO NOT WRITE IN THIS SPACE

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: MARIA Y. SEGARRA 03/11/2008 305 365 8085
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #