2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

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Entity Name: DONSEG FLORIDA CORP.

Current Principal Place of Business:

799 CRANDON BLVD
#305
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

799 CRANDON BLVD
#305
KEY BISCAYNE, FL 33149

New Mailing Address:

FEI Number: 20-1616539 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	DP	( ) Delete
Name:	DON-ZABALA, ERASMO	
Address:	CONDOMINO PUERTO PASEOS AVE LAS CUMBRES 38	
City-St-Zip:	SAN JUAN PR 00926-6658,	
Title:	DS	( ) Delete
Name:	SEGARRA, MARIA Y	
Address:	CONDOMINO PUERTO PASEOS AVE LAS CUMBRES 38	
City-St-Zip:	SAN JUAN PR 00926-6658,	
Title:	D	( ) Delete
Name:	DON-SEGARRA, MARIETTA	
Address:	CONDOMINO PUERTO PASEOS AVE LAS CUMBRES 38	
City-St-Zip:	SAN JUAN PR 00926-6658,	
Title:	D	( ) Delete
Name:	DON-SEGARRA, ERIK	
Address:	2501 BRICKELL AVE #1101	
City-St-Zip:	MIAMI, FL 33129	
Title:	D	( ) Delete
Name:	MARTINEZ, YOLANDA D	
Address:	727 CRANDON BLVD #201	
City-St-Zip:	KEY BISCAYNE, FL 33149	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: DON-ZABALA, ERASMO DP 04/27/2009

Electronic Signature of Signing Officer or Director — Date