

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000069851

Entity Name: DOMMEX , CORP

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

10441 SW 155 CT
#914
MIAMI, FL 33196

New Principal Place of Business:

16546 SW 97 TERRACE
MIAMI, FL 33196

Current Mailing Address:

10441 SW 155 CT
#914
MIAMI, FL 33196

New Mailing Address:

16546 SW 97 TERRACE
MIAMI, FL 33196

FEI Number: 20-1061548

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESPAILLAT, ABRAHAM
10441 SW 155 CT
#914
MIAMI, FL 33196 US

Name and Address of New Registered Agent:

ESPAILLAT, ABRAHAM
16546 SW 97 TERRACE
MIAMI, FL 33196 US

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: ABRAHAM ESPAILLAT

04/27/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ESPAILLAT, ABRAHAM
Address: 10441 SW 155 CT # 914
City-St-Zip: MIAMI, FL 33196

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ESPAILLAT, ABRAHAM
Address: 16546 SW 97 TERRACE
City-St-Zip: MIAMI, FL 33196

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ABRAHAM ESPAILLAT

P

04/27/2005

Electronic Signature of Signing Officer or Director

Date