

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000138157

FILED
Jul 14, 2005
Secretary of State

Entity Name: DONSEG CONDO-HOTEL CORP.

Current Principal Place of Business:

799 CRANDON BLVD #305
KEY BISCAYNE, FL 33149

New Principal Place of Business:

799 CRANDON BLVD
#305
KEY BISCAYNE, FL 33149

Current Mailing Address:

799 CRANDON BLVD #305
KEY BISCAYNE, FL 33149

New Mailing Address:

799 CRANDON BLVD
#305
KEY BISCAYNE, FL 33149

FEI Number: 20-1716120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARAZOZA & FERNANDEZ-FRAG, 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DON-ZABALA, ERASMO
Address: CONDOMINIO PUERTO PASEOS AVE LAS CUMBRES
City-St-Zip: SAN JUAN, PR 009266658

Title: DS () Delete
Name: SEGARRA, MARIA Y
Address: CONDOMINIO PUERTO PASEOS AVE LAS CUMBRES
City-St-Zip: SAN JUAN, PR 009266658

Title: D () Delete
Name: DON-SEGARRA, MARIETTA
Address: CONDOMINIO PUERTO PASEOS AVE LAS CUMBRES
City-St-Zip: SAN JUAN, PR 009266658

Title: D () Delete
Name: DON-SEGARRA, ERCK
Address: CONDOMINIO PUERTO PASEOS AVE LAS CUMBRES
City-St-Zip: SAN JUAN, PR 009266658

Title: D () Delete
Name: DON MARTINEZ, YOLANDA
Address: CONDOMINIO PUERTO PASEOS AVE LAS CUMBRES
City-St-Zip: SAN JUAN, PR 009266658

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 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: ERASMO DON-ZABALA

DP

07/14/2005

Electronic Signature of Signing Officer or Director

Date