

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000139757

Entity Name: KHALIA DONALDSON, INC.

FILED  
Sep 17, 2009  
Secretary of State

## Current Principal Place of Business:

19562 E COUNTRY CLUB DRIVE  
AVENTURA, FL 33180

## New Principal Place of Business:

19334 E COUNTRY CLUB DRIVE  
AVENTURA, FL 33180

## Current Mailing Address:

19562 E COUNTRY CLUB DRIVE  
AVENTURA, FL 33180

## New Mailing Address:

19334 E COUNTRY CLUB DRIVE  
AVENTURA, FL 33180

FEI Number: 34-2023060

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DONALDSON, KHALIA  
4005 SW 52ND AVE. #107  
HOLLYWOOD, FL 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: P ( ) Delete  
Name: DONALDSON, KHALIA  
Address: 5868 NW 199TH ST  
City-St-Zip: HIALEAH, FL 33015

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: KHALIA DONALDSON

PRES

09/17/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date