

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000158652

1. Entity Name  
DG HOME INVESTMENT CORP



FILED

05 MAR 17 AM 11:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business

7515 SW 28 ST RD  
MIAMI, FL 33155

Mailing Address

7515 SW 28 ST RD  
MIAMI, FL 33155

2. Principal Place of Business

8353 SW 5 ST

3. Mailing Address

8353 SW 5 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03162005

Chg-P

CR2E034 (10/03)

City & State

Miami FL

City & State

Miami FL

4. FEI Number

☒ Applied For  
☐ Not Applicable

Zip

33144

Country

U.S.A

Zip

33144

Country

U.S.A

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GONZALEZ, DANIEL  
7515 SW 28 ST RD  
MIAMI, FL 33155

7. Name and Address of New Registered Agent

Name Daniel Gonzalez

Street Address (P.O. Box Number is Not Acceptable)

8353 SW 5 ST

City Miami

FL

Zip Code 33144

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

03/16/05

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D  
NAME GONZALEZ, DANIEL  
STREET ADDRESS 7515 SW 28 ST RD  
CITY-ST-ZIP MIAMI, FL 33155 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P  
NAME DANIEL GONZALEZ  
STREET ADDRESS 8353 SW 5 ST  
CITY-ST-ZIP MIAMI FL 33144 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/16/05

Date

(786) 346-4699

Daytime Phone #