2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Sep 02, 2006
Secretary of State

DOCUMENT# P05000126130

Entity Name: DORIA FINANCIAL INCORPORATED

Current Principal Place of Business:

1424 NW 178TH TERRACE
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

1424 NW 178TH TERRACE
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: 20-3404388 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DORIA, GUADALUPE
21300 NE 8TH CT
UNIT #7
NORTH MIAMI, FL 33179 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

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DORIA, GUADALUPE
Address: 1424 NW 178TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: V ( ) Delete
Name: DORIA, DONALD
Address: 1424 NW 178TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: S ( ) Delete
Name: DORIA, CAROL
Address: 1424 NW 178TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: DORIA, GIANELLA M
Address: 1424 NW 178TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: V (X) Change ( ) Addition
Name: DORIA, CAROL
Address: 1424 NW 178TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: T (X) Change ( ) Addition
Name: DORIA, GUADALUPE
Address: 1424 NW 178TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: S ( ) Change (X) Addition
Name: DORIA, DONALD
Address: 1424 NW 178 TERR
City-St-Zip: PEMBROKE PINES, FL 33029 US

I hereby certify that the information supplied with this filing does not qualify for the 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: CAROL DORIA V 09/02/2006

Electronic Signature of Signing Officer or Director — Date