

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000162326

FILED  
Jan 28, 2009  
Secretary of State

Entity Name: DOMINGUEZ INTERNATIONAL, INC.

## Current Principal Place of Business:

150 ALHAMBRA CIRCLE  
SUITE 1240  
CORAL GABLES, FL 33134 US

## New Principal Place of Business:

10380 SW 140 STREET  
MIAMI, FL 33176 US

## Current Mailing Address:

150 ALHAMBRA CIRCLE  
SUITE 1240  
CORAL GABLES, FL 33134 US

## New Mailing Address:

10380 SW 140 STREET  
MIAMI, FL 33176 US

FEI Number: 02-0783480

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BARRERO-DOMINGUEZ, FARA C  
150 ALHAMBRA CIRCLE  
SUITE 1240  
CORAL GABLES,, FL 33134 US

## Name and Address of New Registered Agent:

BARRERO-DOMINGUEZ, FARA C  
10380 SW 140 STREET  
MIAMI, FL 33176 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: FARA BARRERO-DOMINGUEZ

01/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BARRERO-DOMINGUEZ, FARA C  
Address: 150 ALHAMBRA CIRCLE, SUITE 1240  
City-St-Zip: CORAL GABLES,, FL 33134 US

Title: VP ( ) Delete  
Name: BARRERO-DOMINGUEZ, FARA C  
Address: 150 ALHAMBRA CIRCLE, SUITE 1240  
City-St-Zip: CORAL GABKES,, FL 33134 US

Title: T (X) Delete  
Name: DOMINGUEZ, EFRAIN  
Address: 150 ALHAMBRA CIR SUITE 1240  
City-St-Zip: CORAL GABLES, FL 33134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BARRERO-DOMINGUEZ, FARA C  
Address: PO BOX 561032  
City-St-Zip: PINECREST, FL 33256 US

Title: T (X) Change ( ) Addition  
Name: DOMINGUEZ, EFRAIN  
Address: PO BOX 561032  
City-St-Zip: PINECREST, FL 33256

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: FARA BARRERO-DOMINGUEZ

P

01/28/2009

Electronic Signature of Signing Officer or Director

Date