

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000046141

Entity Name: EL CORREO DE DORAL, INC.

FILED  
Apr 23, 2009  
Secretary of State

## Current Principal Place of Business:

8390 NW 53 STREET  
DORAL, FL 33166

## New Principal Place of Business:

8390 NW 53 STREET  
STE 310  
DORAL, FL 33166

## Current Mailing Address:

8390 NW 53 STREET  
DORAL, FL 33166

## New Mailing Address:

8390 NW 53 STREET  
STE 310  
DORAL, FL 33166

FEI Number: 26-2595067

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MUNOZ, ISABEL  
8390 NW 53 STREET  
DORAL, FL 33166 US

## Name and Address of New Registered Agent:

MUNOZ, ISABEL  
8390 NW 53 STREET  
STE 310  
DORAL, FL 33166 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: ISABEL MUNOZ

04/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MUNOZ, ISABEL  
Address: 8390 NW 53 STREET  
City-St-Zip: DORAL, FL 33166

Title: VD ( ) Delete  
Name: BELLO, SILVIA  
Address: 8390 NW 53 STREET  
City-St-Zip: DORAL, FL 33166

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MUNOZ, ISABEL  
Address: 8390 NW 53 STREET, STE 318  
City-St-Zip: DORAL, FL 33166

Title: VD (X) Change ( ) Addition  
Name: BELLO, SILVIA  
Address: 8390 NW 53 STREET, STE 318  
City-St-Zip: DORAL, FL 33166

Title: SD ( ) Change (X) Addition  
Name: ONE WAY ADVERTISING INC  
Address: 8390 NW 53 STREET, STE 310  
City-St-Zip: DORAL, FL FL 33166

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: ISABEL MUNOZ

PD

04/23/2009

Electronic Signature of Signing Officer or Director

Date