


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Mar 31, 2005 08:00 AM
Secretary of State**

DOCUMENT # P94000060569
1. Entity Name
DORI BUSINESS, INC.



Principal Place of Business Mailing Address
**3600 N.W. 37TH COURT
MIAMI, FL 33142** **3600 N.W. 37TH COURT
MIAMI, FL 33142**



03022005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
65-0530128 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**MULLER, GEORGE
3600 N.W. 37 COURT
MIAMI, FL 33142**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating)

**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

U00000281684
03/31/05-80012-025 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MULLER, GEORGE
STREET ADDRESS	3600 N.W. 37TH COURT
CITY-ST-ZIP	MIAMI, FL 33142
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: *Ge Muller* 3/18/05 _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #