


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90087 006 ***150.00

DOCUMENT # P95000010228	
1. Entity Name DOMARC ENTERPRISES, INC.	

Principal Place of Business 6614 SW 114TH PLACE UNIT D MIAMI, FL 33173	Mailing Address 6614 SW 114TH PLACE UNIT D MIAMI, FL 33173 14343 S W 97th Terr Miami, FL 33186
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DO NOT WRITE IN THIS SPACE



01032007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0550973	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CARDOSO, MARCIO 6614 SW 114TH PLACE UNIT D MIAMI, FL 33173 14343 S W 97th Terr Miami, FL 33186

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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 _____	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CARDOSO, MARCIO 14343 SW 97th Terr 6614 SW 114TH PLACE UNIT D MIAMI, FL 33173 Miami, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ARANTES, CRISTIANO 14343 SW 97th Terr 6614 SW 114TH PLACE UNIT D MIAMI, FL 33173 Miami, FL 33186
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>X</i> <i>Myra Cardoso</i>	Date: 01/13/07	Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		