

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000048809

Entity Name: DOMASA, INC.

FILED  
Feb 06, 2007  
Secretary of State

## Current Principal Place of Business:

520 BRICKELL KEY DR  
1810  
MIAMI, FL 33131

## New Principal Place of Business:

## Current Mailing Address:

520 BRICKELL KEY DR  
1810  
MIAMI, FL 33131

## New Mailing Address:

FEI Number: 52-2035314

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ARAZOZA & FERNANDEZ FRAGA, P.A  
2100 SALZEDO ST  
STE 300  
CORAL GABLES, FL 33134 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SANTOS, PEDRO SR.  
Address: C/O 2100 SALZEDO ST STE 300  
City-St-Zip: CORAL GABLES, FL 33134

Title: VD ( ) Delete  
Name: SANTOS, BERTA  
Address: C/O 2100 SALZEDO ST STE 300  
City-St-Zip: CORAL GABLES, FL 33134

Title: SD ( ) Delete  
Name: SANTOS, PEDRO JR.  
Address: C/O 2100 SALZEDO ST STE 300  
City-St-Zip: CORAL GABLES, FL 33134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: PEDRO SANTOS

PD

02/06/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date