FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

P9700006735 (9) **DOCUMENT**

DORAR REALTY, INC.

Principal	Place	of	Business

Mailing Address

FILED Feb 27 1998 8:00am Secretary of State



7281 CORAL WAY MIAMI FL 33155		7281 CORAL WAY MIAMI FL 33155				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified 01/17/1997
. Principal Plac	o of Business	2a. Mailing Ad	dress			4. FEI Number Applied For
ו		26				65-073 de 86 Not Applied 10
Suite, Apt. #,	etc	Suite, Apt	#, etc.			Certificate of Status Desired Sa.75 Additional Fee Required
City & State		City & State	0			6. Election Campaign Financing \$5.00 May Be
]		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	— <u> </u>	untry	,	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
·I	25 9. Name and Address of Cur	rent Registered Agen	30	1		10. Name and Address of New Registered Agent
VALDES, RAYMOND			81 82		dress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33155			Ш			
				83		
				84	City	FL 85 Zip Code

agent I ar	n familiar with, and accept the obligations	of, Section 607.0505, Flo	rida Statutes.		•••	.				
SIGNATURE	Signature, typod or prefed pank of registered agent and	tite il neplicable (NOTE	Registered Agent signature	e required when reinstaling) DAI	Œ.					
12.	OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							
TITLE	D	DELETE	11 TITLE		☐ Change	Addition				
NAME	VALDES, RAYMOND		1.2 NAME							
STREET ADDRESS	7281 CORAL WAY		1.3 STREET ADDRESS							
CITY-ST-ZIP	MIAMI FL 33155		1.4 CITY-ST-ZIP							
TITLE	D	DELETE	21 TITLE	PREBIDENT, GEGGETALY	Change	☐ Addition				
NAME	MUSE, JOSE L		2 2 NAME	MUSE TOBE A	•					
STREET ADDRESS	7281 CORAL WAY		2 3 STREET ADDRESS	MUSE, JOSE A 7281 CORAL WAY						
CITY-ST-ZIP	MIAMI FL 33155		2. 4 CITY - ST- ZIP	MIAMI, FL 33155						
TITLE		DELETE	3.1 TITLE		Change	☐ Addition				
NAME			3.2 NAME							
STREET ADDRESS			3.3 STREFT ADDRESS							
CITY-ST-ZIP			3.4. CITY-ST-ZIP	1						
TITLE		DELETE	4.1 TITLE		Change	Addition				
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREET ADDRESS							
CITY-SI-ZIP			4.4 CITY-ST-ZIP							
TITLE		DELETE	5.1 TITLE		Change	Addition				
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREET ADDRESS							
CITY-ST-ZIP			5.4 CITY - ST - 2IP							
TITLE		DELETE	6.1 TITLE		☐ Change	Addition				
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREET ADDRESS							
			I							

14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

2/12/98

305.264 6000