


1082

2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
2008 MAR 17 PM 1:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000005124	
1. Entity Name DORAL AUTO PAINT CORP.	

Principal Place of Business 1002 E. 29TH STREET HALEAH, FL 33013	Mailing Address 1002 E. 29TH STREET HALEAH, FL 33013
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2. Principal Place of Business - No P.O. Box # 13091 Port Said Rd. #8	3. Mailing Address 3285 NW 103rd Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Opa Locka, FL	City & State Miami, Florida
Zip 33054	Zip 33147
Country US	Country US



6. Name and Address of Current Registered Agent ALFONSO, JOSUE 1002 E. 29TH STREET HALEAH, FL		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 3285 NW 103rd Street City Miami	
		FL Zip Code 33147	

4. FEI Number 65-0888869	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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 _____

FILE NOW!!! FEE IS \$300.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD ALFONSO, JOSUE 10416 N.W. 32ND AVENUE MIAMI, FL 33147 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 3285 NW 103rd Street Miami, FL 33147
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 500120417735 03/17/08--01005--003 **300.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Josue Alfonso 3/17/08 305-696-3755
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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DORAL AUTO PAINT CORP.
13091 Port Said Rd., #8
Opa Locka, Fl 33054

March 3, 2008.

Division of Corporation
P.O. Box 6327
Tallahassee, Fl 32314

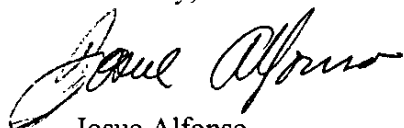
Dear Sirs:

Due to this corporation changed its address, we did not receive the Uniform Business Report for the years 2007 and 2008. It is for the reason we did not make the payments for those years.

We kindly ask that you accept the attach check in the amount of \$300.00, since those payments were not voluntarily made late.

We express our gratitude in advance.

Sincerely,



Josue Alfonso
President