

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000048160

FILED  
Jan 27, 2006  
Secretary of State

Entity Name: DORAL WEST, INC.

## Current Principal Place of Business:

9100 S DADELAND BLVD  
SUITE 1412  
MIAMI, FL 33156

## New Principal Place of Business:

9100 S DADELAND BLVD  
SUITE 1101  
MIAMI, FL 33156

## Current Mailing Address:

9100 S DADELAND BLVD  
SUITE 1412  
MIAMI, FL 33156

## New Mailing Address:

9100 S DADELAND BLVD  
SUITE 1101  
MIAMI, FL 33156

FEI Number: 65-0934264

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GARCIA, HORACIO  
9100 S DADELAND BLVD  
SUITE 1412  
MIAMI, FL 33156 US

## Name and Address of New Registered Agent:

GARCIA, HORACIO  
9100 S DADELAND BLVD  
SUITE 1101  
MIAMI, FL 33156 US

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: HORACIO GARCIA

01/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GARCIA, HORACIO  
Address: 6850 RIVIERA DRIVE  
City-St-Zip: CORAL GABLES, FL 33146

Title: SVD ( ) Delete  
Name: MENENDEZ, PEDRO  
Address: 435 LEUCADENDRA DRIVE  
City-St-Zip: CORAL GABLES, FL 33156

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: GARCIA, HORACIO  
Address: 60 EDGEWATER DR. C15  
City-St-Zip: CORAL GABLES, FL 33133

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 MENENDEZ

DIR

01/27/2006

Electronic Signature of Signing Officer or Director

Date