2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N41197

Entity Name: THE DORAL COMMON CORPORATION

FILED
Aug 02, 2017
Secretary of State
CC5120295575

Current Principal Place of Business:

C/O DORAL MANAGEMENT 10705 NW 33RD STREET SUITE 100 DORAL, FL 33172

Current Mailing Address:

C/O DORAL MANAGEMENT 10705 NW 33RD STREET SUITE 100 DORAL, FL 33172 US

FEI Number: 65-0234522 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DORAL MANAGEMENT 10705 NW 33RD STREET, SUITE 100 DORAL, FL 33172 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:

Officer/Director Detail:

Title PRESIDENT Title VP

Electronic Signature of Registered Agent

Name JONES, JESSE Name DE JAHAM, LAURENT

Address C/O DORAL MANAGEMENT Address C/O DORAL MANAGEMENT

10705 NW 33RD STREET SUITE 100 10705 NW 33RD STREET SUITE 100

City-State-Zip: DORAL FL 33172 City-State-Zip: DORAL FL 33172

Title SECRETARY Title ASST. SECRETARY

Name FERNANDEZ, ALFONSO Name ROLDOS, MIRIAM

Address C/O DORAL MANAGEMENT Address C/O DORAL MANAGEMENT

10705 NW 33RD STREET SUITE 100 10705 NW 33RD STREET SUITE 100

City-State-Zip: DORAL FL 33172 City-State-Zip: DORAL FL 33172

TitleTREASURERTitleASST. TREASURERNameCASTRO, NICEFORO EDUARDONameROTOLO, ALBERTO

Address C/O DORAL MANAGEMENT Address C/O DORAL MANAGEMENT

10705 NW 33RD STREET SUITE 100 10705 NW 33RD STREET SUITE 100

City-State-Zip: DORAL FL 33172 City-State-Zip: DORAL FL 33172

Date

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.