

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000012030

**Entity Name:** DORAL OFFICE SUPPLIERS INC.

**Current Principal Place of Business:**

8400 NW 17TH STREET  
DORAL, FL 33126

**Current Mailing Address:**

8400 NW 17TH STREET  
DORAL, FL 33126 US

**FEI Number: 27-3092831**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

FRAIOLI, NICOLINA  
7800 NW 25TH STREET  
DORAL, FL 33122 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name QUEREGUAN, IRMA  
Address 8400 NW 17TH STREET  
City-State-Zip: DORAL FL 33126

Title P  
Name VALLENOTTI, MARIA  
Address 8400 NW 17TH STREET  
City-State-Zip: DORAL FL 33126

Title S  
Name FRAIOLI RODRIQUEZ, NATALIO  
PASCUA  
Address 8400 NW 17TH STREET  
City-State-Zip: DORAL FL 33126

Title TS  
Name SOLORZANO, JULIETA  
Address 8400 NW 17TH STREET  
City-State-Zip: DORAL FL 33126

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

**SIGNATURE: IRMA QUEREGUAN**

**VP**

**04/29/2013**

Electronic Signature of Signing Officer/Director Detail

Date