

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000063444

**Entity Name:** DOMISAL INC

**Current Principal Place of Business:**

8930 W STATE ROAD 84  
311  
DAVIE, FL 33324

**Current Mailing Address:**

8930 W STATE ROAD 84  
311  
DAVIE, FL 33324

**FEI Number:** 47-4645649

**Certificate of Status Desired:** No

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

DOMINGUEZ, MARK  
9460 POINCIANA PLACE  
407  
DAVIE, FL 33324 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 P  
Name DOMINGUEZ, MARK  
Address 9460 POINCIANA PLACE 407  
City-State-Zip: DAVIE FL 33324

Title VP  
Name DOMINGUEZ, NANCY  
Address 9460 POINCIANA PLACE 407  
City-State-Zip: DAVIE FL 33324

Title TRE  
Name DOMINGUEZ, MARIANA  
Address 9460 POINCIANA PLACE 407  
City-State-Zip: DAVIE FL 33324

Title SEC  
Name DOMINGUEZ, JUAN  
Address 9460 POINCIANA PLACE 407  
City-State-Zip: DAVIE FL 33324

*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:** MARK DOMINGUEZ

**PRE**

**04/05/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date