

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721665

FILED  
Feb 22, 2010  
Secretary of State

**Entity Name:** ACTION COMMUNITY CENTER, INC.

**Current Principal Place of Business:**

970 SW FIRST ST., STE 304  
MIAMI, FL 33130

**New Principal Place of Business:**

970 SW FIRST ST.  
SUITE # 304  
MIAMI, FL 33130

**Current Mailing Address:**

970 SW FIRST ST., STE 304  
MIAMI, FL 33130

**New Mailing Address:**

970 SW FIRST ST  
SUITE # 304  
MIAMI, FL 33130

FEI Number: 59-1620743

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MONTES DE OCA, MERCY  
502 N.W. 87TH AVE. #106  
MIAMI, FL 33172 US

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

MONTES DE OCA, MERCY  
502 N.W. 87TH AVE.  
APT # 106  
MIAMI, 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: \_\_\_\_\_

Electronic Signature of Registered Agent

02/22/2010

Date

**OFFICERS AND DIRECTORS:**

Title: PCD  
Name: ALZOLA, ERNESTO  
Address: 1101 SW 103RD COURT  
City-St-Zip: MIAMI, FL

Title: VD  
Name: BAGUE, IRELA  
Address: 15 MADEIRA AVE #6  
City-St-Zip: CORAL GABLES, FL 33134

Title: SD  
Name: ACOSTA, DOMINGO  
Address: 3950 SW 2ND STREET  
City-St-Zip: MIAMI, FL

Title: TD  
Name: MONTES DE OCA, MERCY  
Address: 502 N.W. 87TH AVE. #106  
City-St-Zip: MIAMI, FL 33172

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.

SIGNATURE: IRELA BAGUE

VD

02/22/2010

Electronic Signature of Signing Officer or Director

Date