

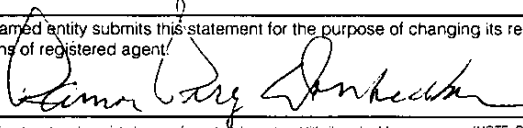


**2007 NOT-FOR-PROFIT CORPORATION  
AMENDED ANNUAL REPORT**

**FILED**  
**Feb 12, 2007 8:00 am**  
**Secretary of State**

02-12-2007 90107 031 \*\*\*\*61.25

<b>DOCUMENT # 727668</b>					
1. Entity Name <b>LITTLE HAVANA ACTIVITIES &amp; NUTRITION CENTERS OF DADE COUNTY, INC.</b>					
Principal Place of Business 700 S.W. 8TH ST. MIAMI, FL 33130		Mailing Address 700 S.W. 8TH ST. MIAMI, FL 33130		40015234  	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	02052007 Chg-NP CR2E037 (12/06)	
4. FEI Number <b>23-7378008</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>RAMON PEREZ, DORBECKER</b> 700 S.W. 8TH ST. MIAMI, FL 33130			7. Name and Address of New Registered Agent Name <b>Ramon Pérez-Dörrbecker</b> Street Address (P.O. Box Number is Not Acceptable) <b>700 SW 8th Street</b> City <b>Miami</b> <b>FL</b> Zip Code <b>33130</b>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Amended AR is \$61.25</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	CD <input type="checkbox"/> Delete	TITLE	PD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	TORANO, RAUL	NAME	Pérez-Dörrbecker, Ramon		
STREET ADDRESS	700 S.W. 8TH STREET	STREET ADDRESS	700 SW 8th Street Miami, FL 33130		
CITY-ST-ZIP	MIAMI, FL 33130	CITY-ST-ZIP			
TITLE	VCD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	PEREIRA, SERGIO	NAME			
STREET ADDRESS	700 SW 8TH ST	STREET ADDRESS			
CITY-ST-ZIP	MIAMI, FL	CITY-ST-ZIP			
TITLE	SD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BORGES, LUIS	NAME			
STREET ADDRESS	700 SW 8TH STREET	STREET ADDRESS			
CITY-ST-ZIP	MIAMI, FL 33130	CITY-ST-ZIP			
TITLE	VSD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MARRERO, MANUEL	NAME			
STREET ADDRESS	700 SW 8TH ST	STREET ADDRESS			
CITY-ST-ZIP	MIAMI, FL 33130	CITY-ST-ZIP			
TITLE	TD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SABATER, CARLOS A	NAME			
STREET ADDRESS	700 S.W. 8TH STREET	STREET ADDRESS			
CITY-ST-ZIP	MIAMI, FL	CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <b>Ramon Pérez-Dörrbecker, President</b>			02/08/07 (305) 858-0887		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small>		<small>Daytime Phone #</small>