

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735545

FILED
Feb 12, 2009
Secretary of State

Entity Name: MUNICIPIO DE SAN JOSE DE LAS LAJAS, INC.

Current Principal Place of Business:

130 SW BEACON BLVD
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

PO BOX 450504
MIAMI, FL 33145

New Mailing Address:

FEI Number: 59-2364473 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENITEZ, PEDRO
225 W. 33RD ST.
HIALEAH, FL 33010 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GONZALEZ, WALKIRIA
Address: 664 SE 4TH PLACE
City-St-Zip: HIALEAH, FL 33010

Title: VP (X) Delete
Name: HERNANDEZ, JUAN
Address: 10640 SW 67 ST
City-St-Zip: MIAMI, FL 33173

Title: VTD () Delete
Name: DELGADO, ANDRES
Address: 8982 NW 16758
City-St-Zip: MIAMI LAKES, FL 33018

Title: TD () Delete
Name: RUIZ, ALICIO
Address: 9350 W FLAGLER APT 201
City-St-Zip: MIAMI, FL 33174

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RIVERO, ORLANDO
Address: 10295 SW 34 ST
City-St-Zip: MIAMI, FL 33165

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VTD (X) Change () Addition
Name: GONZALEZ, WALKIRIA
Address: 664 SE 4 PL
City-St-Zip: HIALEAH, FL 33010

Title: TD (X) Change () Addition
Name: RUIZ, ALICIO
Address: 181 NW 97 AVE APT 301
City-St-Zip: MIAMI, FL 33172

Title: S () Change (X) Addition
Name: HERNANDEZ, JUAN
Address: 10640 SW 67 ST
City-St-Zip: MIAMI, FL 33173

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ORLANDO RIVERO

PD

02/12/2009

Electronic Signature of Signing Officer or Director

Date