

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 25, 2008
Secretary of State**

DOCUMENT# N00000000234

Entity Name: LATINOS UNITED IN ACTION CENTER, INC.

Current Principal Place of Business:

3321 NW 17TH AVE.
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

3321 NW 17TH AVE.
MIAMI, FL 33142

New Mailing Address:

FEI Number: 65-1008371 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

VARGAS, JUANA A
610 SW 21 ROAD
MIAMI, FL 33129 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: D () Delete
Name: VARGAS, JUANA M
Address: 610 SW 21 ROAD
City-St-Zip: MIAMI, FL 33129

Title: D () Delete
Name: PEREZ, SYLVESTER
Address: 80 S. SHORE DRIVE APT 509
City-St-Zip: MIAMI, FL 33141

Title: D () Delete
Name: MONEGRO, VIRGINIA
Address: 80 S. SHORE DRIVE APT 509
City-St-Zip: MIAMI BEACH, FL 33141

Title: D () Delete
Name: URANGA, PEDRO
Address: 610 SW 21 ROAD
City-St-Zip: MIAMI, FL 33129

Title: D () Delete
Name: VARGAS, ZUNILDA
Address: 80 S SHORE DRIVE, SPT 508
City-St-Zip: MIAMI BEACH, FL 33141

Title: D () Delete
Name: FELDMAN, STEVEN
Address: 1364 SW 181 AVE
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D (X) Change () Addition
Name: VARGAS, JULIO
Address: 610 SW 21 R
City-St-Zip: MIAMI BEACH, FL 33141

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

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: JUANA A. VARGAS

D

05/25/2008

Electronic Signature of Signing Officer or Director

_____ Date