

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 29, 2008  
Secretary of State**

DOCUMENT# N00000000382

Entity Name: LATIN AMERICAN VOTERS LEAGUE, INC.

**Current Principal Place of Business:**

8347 SW 40TH STREET  
MIAMI, FL 33155

**New Principal Place of Business:**

**Current Mailing Address:**

8347 SW 40TH STREET  
MIAMI, FL 33155

**New Mailing Address:**

FEI Number: 65-1074004      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MASSA, SERGIO  
8347 SW 40TH STREET  
MIAMI, FL 33155      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: PSD ( ) Delete  
Name: SERGIO, MASSA  
Address: 8347 SW 40 STREET  
City-St-Zip: MIAMI, FL 33155

Title: D ( ) Delete  
Name: PEGUERO, RHADAMES  
Address: 2885 NW 36TH STREET  
City-St-Zip: MIAMI, FL 33142

Title: VD ( ) Delete  
Name: SANDIGO, NORA  
Address: 11971 SW 118 ST  
City-St-Zip: MIAMI, FL 33186

Title: VD ( ) Delete  
Name: JOSE, LAGOS  
Address: 1421 SW 8 STREET, STE 4  
City-St-Zip: MIAMI, FL 33135

**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:

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: SERGIO MASSA

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04/29/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date