

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 8:00 am
Secretary of State

01-16-2007 90261 017 ****70.00

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01092007 Chg-NP CR2E037 (12/06)

DOCUMENT # N02000006319 1. Entity Name SAN JOSE OBRERO FOUNDATION CORP.					
Principal Place of Business 822 SW 66TH AVE. MIAMI, FL 33144			Mailing Address P.O. BOX 45-1007 MIAMI, FL 33245		
2. Principal Place of Business - No P.O. Box # 7106 NW 50 ST		3. Mailing Address PO Box 45-1007			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State MIAMI Florida		City & State MIAMI Florida		4. FEI Number 03-0481427	
Zip 33166		Country USA		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CARRERAS, JOSEFINA 1019 S.W. 24 ROAD MIAMI, FL 33129		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
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 _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reconstituting) DATE					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LOPEZ, ALEJANDRO FATHER 1019 S.W. 24 ROAD MIAMI, FL 33129	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GONZALEZ, Rolando 7106 NW 50 ST MIAMI FL 33166
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ORTEGA, BERTHA 822 SW 66TH AVENUE MIAMI, FL 33144	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TARRE, MARY 1400 S W 27 Ave #505 MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CARRERAS, JOSEFINA 1019 S.W. 24 ROAD MIAMI, FL 33129	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ORTEGA, BETTY 822 SW 66TH AVENUE MIAMI, FL 33144	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		TITLE NAME STREET ADDRESS 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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			01-10-07 (305) 989-9144 Date Daytime Phone #		

Josefina Carreras, Treasurer