2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# N05000005832

Entity Name: SR. SANTO NINO SINULOG OF MIAMI, INC.

Current Principal Place of Business:

20231 SW 128 COURT
MIAMI, FL 33177 US

New Principal Place of Business:

Current Mailing Address:

20231 SW 128 COURT
MIAMI, FL 33177 US

New Mailing Address:

155223 SW 41 ST
PO BOX 650615
MIAMI, FL 33185 US

FEI Number: 20-3015274 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SICSIC, ISABELO
20231 SW 128 COURT
MIAMI, FL 33177 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: DC ( ) Delete
Name: MENDOZA, MERLINDA
Address: 6443 SW 166 COURT
City-St-Zip: MIAMI, FL 33193 US

Title: DVC ( ) Delete
Name: QUINTANA, JAPIT
Address: 17433 SW 143 PLACE
City-St-Zip: MIAMI, FL 33177 US

Title: DS ( ) Delete
Name: VILLANUEVA, JACQUELINE
Address: 7413 SW 158TH PLACE
City-St-Zip: MIAMI, FL 33193 US

Title: DT ( ) Delete
Name: GRANADA, MARCELINA
Address: 17307 SW 140 COURT
City-St-Zip: MIAMI, FL 33177 US

Title: D ( ) Delete
Name: SICSIC, JULIET
Address: 20231 SW 128TH COURT
City-St-Zip: MIAMI, FL 33177 US

Title: D ( ) Delete
Name: REYES, PROCOPIO
Address: 7024 SW 161 PLACE
City-St-Zip: MIAMI, FL 33193 US

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: ( ) 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: JACQUELINE VILLANUEVA DS 04/28/2008

Electronic Signature of Signing Officer or Director — Date