2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011835

FILED Sep 21, 2008 Secretary of State

Entity Name: SEMANA DE LA HERENCIA CULTURAL DOMINICO AMERICANA, INC.

	rincipal Place of Business:	New Principal Place of Business:
3321 NW SUITE 102 MIAMI, FL		
Current M	lailing Address:	New Mailing Address:
3321 NW SUITE 102 MIAMI, FL		
	: FEI Number Applied For (X) ice with s. 607.193(2)(b), F.S., the corporation did no I Address of Current Registered Agent:	FEI Number Not Applicable () Certificate of Status Desired (X) of receive the prior notice. Name and Address of New Registered Agent:
LATINOS 3321 NW MIAMI, FL	UNITED IN ACTION CENTER, INC. 17TH AVE 33142 US	ourpose of changing its registered office or registered agent, or both,
	e of Florida.	outpose of changing its registered office of registered agent, of both,
SIGNATUI	RE:	
	Electronic Signature of Registered Ag	ent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name:	P () Delete LATINOS UNITED IN AC, TION CENTER, I N C.	Title: () Change () Addition Name:
	3321 NW 17TH AVE. MIAMI, FL 33142	Address: City-St-Zip:
Address: City-St-Zip: Title: Name: Address: City-St-Zip:		
City-St-Zip: Title: Name: Address:	MIAMI, FL 33142 D () Delete VARGAS, JUANA A 610 SW 21 ROAD	City-St-Zip: Title: () Change () Addition Name: Address:
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	MIAMI, FL 33142 D () Delete VARGAS, JUANA A 610 SW 21 ROAD MIAMI, FL 33129 D () Delete URANGA, PEDRO J 610 SW 21 ROAD	City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Address:	MIAMI, FL 33142 D () Delete VARGAS, JUANA A 610 SW 21 ROAD MIAMI, FL 33129 D () Delete URANGA, PEDRO J 610 SW 21 ROAD MIAMI, FL 33129 D () Delete MANUEL, NIN-MATOS 3480 NW 5TH AVE.	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: FRIAS, LUIS Address: 2430 NW 36 ST

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 09/21/2008