

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 13, 2009
Secretary of State**

DOCUMENT# N99000003217

Entity Name: KIWANIS CLUB COLOMBIAN-AMERICAN OF MIAMI DADE, INC.

Current Principal Place of Business:

1915 WEST 8TH AVENUE
HIALEAH, FL 33010

New Principal Place of Business:

Current Mailing Address:

1915 WEST 8TH AVENUE
HIALEAH, FL 33010

New Mailing Address:

FEI Number: 65-0920375 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARULANDA, HECTOR
8487 NW 191 STREET
HIALEAH, FL 33015 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: P () Delete
Name: LAZANO, PLVARO
Address: 1915 WEST ST AVE
City-St-Zip: HIALEAH, FL 33010

Title: S () Delete
Name: PEREZ, MIRIAM
Address: 11861 SW 84 ST
City-St-Zip: MIAMI, FL 33186

Title: TD () Delete
Name: MARULANDA, MARIA L
Address: 8487 NW 19 ST
City-St-Zip: HIALEAH, FL 33015

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:

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: MARIA L. MARULANDA

TRE

04/13/2009

Electronic Signature of Signing Officer or Director

Date