

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000065628

FILED
Feb 02, 2009
Secretary of State

Entity Name: SPIRIT CONFEDERATION, CORP

Current Principal Place of Business:

9431 LIVE OAK PLACE
101
DAVIE, FL 33324

Current Mailing Address:

9431 LIVE OAK PLACE
102
DAVIE, FL 33324

New Principal Place of Business:

9401 LIVE OAK PLACE
104
DAVIE, FL 33324

New Mailing Address:

9401 LIVE OAK PLACE
104
DAVIE, FL 33324

FEI Number: 20-1960983

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ESLAVA, CESAR J
9401 LIVE OAK PLACE
#104
DAVIE, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: TCX (X) Delete
Name: JIMENEZ, WILLIAM
Address: 9411 LIVE OAK PLACE NO. 101
City-St-Zip: DAVIE, FL 33324

Title: ED () Delete
Name: MAZUERA, DIANA E
Address: 9411 LIVE OAK PL
City-St-Zip: DAVIE, FL 33324

Title: PSTD (X) Delete
Name: VALENCIA, LUZ A
Address: 9401 LIVE OAK PL # 104
City-St-Zip: DAVIE, FL 33324

Title: VD () Delete
Name: ESLAVA, CESAR J
Address: 9401 LIVE OAK PLACE #104
City-St-Zip: DAVIE, FL 33324

Title: OD (X) Delete
Name: VALENCIA, LUCILA
Address: 9401 LIVE OAK PL # 104
City-St-Zip: DAVIE, FL 33324

Title: OD (X) Delete
Name: VALENCIA, INES
Address: 9411 LIVE OAK PL
City-St-Zip: DAVIE, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: OFIC (X) Change () Addition
Name: MAZUERA, DIANA E
Address: 9431 LIVE OAK PL NO. 102
City-St-Zip: DAVIE, FL 33324

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PSDT (X) Change () Addition
Name: ESLAVA, CESAR J
Address: 9401 LIVE OAK PLACE #104
City-St-Zip: DAVIE, FL 33324

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANA E. MAZUERA

OFIC

02/02/2009

Electronic Signature of Signing Officer or Director

Date