2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000064340

Entity Name: LATIN AMERICAN FINANCIAL CORP.

FILED Mar 08, 2008 Secretary of State

Current P	rincipal Place of Business:	New Principal Place	New Principal Place of Business:	
	PTON CREST #105A RY, FL 32746			
Current M	lailing Address:	New Mailing Address	s:	
PO BOX 150156 ALTAMONTE SPRINGS, FL 32715		PO BOX 10998 SAN JUAN, PR 00922	PO BOX 10998 SAN JUAN, PR 00922	
FEI Number	: FEI Number Applied For () FEI Number Not Applicable (X)	Certificate of Status Desired (X)	
Name and	I Address of Current Registered Ager	t: Name and Address o	f New Registered Agent:	
1234 E LA LAKE MAF	DEZ, MIGUEL A NGLEY CT RY, FL 32746 US			
The above in the State	e named entity submits this statement for e of Florida.	the purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:			
	Electronic Signature of Registere	-	Date	
Election Ca	mpaign Financing Trust Fund Contribution ()			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P () Delete ALEJANDRO, MIGUEL H 443 HAMPTON CREST #105A LAKE MARY, FL 32746	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () Delete HERNANDEZ, CYBELLE 443 HAMPTON CREST #105A LAKE MARY, FL 32746	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () Delete ALEJANDRO, SARA M 443 HAMPTON CREST #105A LAKE MARY, FL 32746	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	T () Delete HERNANDEZ, YARELLE	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: CYBELLE HERNANDEZ VP 03/08/2008

443 HAMPTON CREST #105A

LAKE MARY, FL 32746

Address:

City-St-Zip: