2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005908

Address:

City-St-Zip:

9010 S.W. 137 AVENUE # 104

MIAMI, FL 33186

Entity Name: COMMUNITY SERVICE OUTREACH. INC

FILED May 05, 2008 Secretary of State

Littly Na	me. COMMONITY SERVICE OUTREACH,	inc.
Current P	rincipal Place of Business:	New Principal Place of Business:
9010 S.W. STE. 204 MIAMI, FL	137 AVENUE 33186	9010 S.W. 137 AVENUE STE. 104 MIAMI, FL 33186
Current N	lailing Address:	New Mailing Address:
9010 S.W. STE 204 MIAMI, FL	137 AVENUE 33186	9010 S.W. 137 AVENUE STE 104 MIAMI, FL 33186
In accordan	: 20-0119684	FEI Number Not Applicable () Certificate of Status Desired () ot receive the prior notice. Name and Address of New Registered Agent:
3412 SAN HOMESTE	Z, ANA MILENA REMO CIRCLE EAD, FL 33035 US	MARTINEZ, OSCAR 3412 SAN REMO CIRCLE HOMESTEAD, FL 33035 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: OSCAR MARTINEZ	05/05/2008
	Electronic Signature of Registered Ag	ent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	PD () Delete MARTINEZ, OSCAR 3412 SAN REMO CIRCLE HOMESTEAD, FL 33035	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	VD () Delete IXCHU, ALBERTO 4122 N.E. 26TH STREET HOMESTEAD, FL 33033	Title: VD (X) Change () Addition Name: RODRIGUEZ, MARCO Address: 15109 SW 71 LN City-St-Zip: MIAMI, FL 33193
Title: Name: Address: City-St-Zip:	SD () Delete MARTINEZ, ANA MILENA 3412 SAN REMO CIRCLE HOMESTEAD, FL 33035	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete CONTRERAS, GIL 10670 S.W. 156 PLACE #307 MIAMI, FL 33196	Title: D (X) Change () Addition Name: REVOLLO, RAFAEL Address: 13352 SW 39 ST City-St-Zip: MIAMI, FL 33175
Title: Name:	D () Delete RODRIGUEZ, MARCO	Title: D (X) Change () Addition Name: MEJIA, MAURICO

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.

Address:

City-St-Zip:

6465 SW 130 PL #508

MIAMI, FL 33183

SIGNATURE: OSCAR MARTINEZ D 05/05/2008