

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011586

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: RAICES DE ESPERANZA INC.

## Current Principal Place of Business:

11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410

## New Principal Place of Business:

2655 COLLINS AVE.  
APT. 404  
MIAMI BEACH, FL 33140

## Current Mailing Address:

PO BOX 260486  
MIAMI, FL 33126

## New Mailing Address:

FEI Number: 20-3801097

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS RD., STE. 221E  
PALM BEACH GARDENS, FL 33410 US

## Name and Address of New Registered Agent:

GORORDO, LEONARDO F MR.  
2655 COLLINS AVE.  
APT. 404  
MIAMI BEACH, FL 33140 US

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: L. FELICE GORORDO

04/14/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: GORORDO, L. FELICE  
Address: P.O. BOX 260486  
City-St-Zip: MIAMI, FL 33126

Title: D ( ) Delete  
Name: CABRERA, DIANE  
Address: P.O. BOX 260486  
City-St-Zip: MIAMI, FL 33126

Title: D ( ) Delete  
Name: GRIMAL, NICOLE M.  
Address: P.O. BOX 260486  
City-St-Zip: MIAMI, FL 33126

Title: D ( ) Delete  
Name: JIMENEZ, JOSE  
Address: P.O. BOX 260486  
City-St-Zip: MIAMI, FL 33126

Title: D ( ) Delete  
Name: ALDIR, MARITZA B  
Address: PO BOX 260486  
City-St-Zip: MIAMI, FL 33140 US

Title: D ( ) Delete  
Name: CHRISTOPHER, GUEITS  
Address: PO BOX 260486  
City-St-Zip: MIAMI, FL 33126 US

## 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:

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: L. FELICE GORORDO

MR.

04/14/2009

Electronic Signature of Signing Officer or Director

Date