

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000004785

FILED  
Apr 08, 2010  
Secretary of State

**Entity Name:** LADIES EMPOWERMENT AND ACTION PROGRAM, INC.

**Current Principal Place of Business:**

9840 SW 77 AVENUE  
SUITE4 202  
MIAMI, FL 33156

**New Principal Place of Business:**

5001 GRANADA BVD  
MIAMI, FL 33146

**Current Mailing Address:**

9840 SW 77 AVENUE  
SUITE4 202  
MIAMI, FL 33156

**New Mailing Address:**

5001 GRANADA BVD  
MIAMI, FL 33146

**FEI Number:** 27-0193483

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CERVANTES, PAULINA A  
9840 SW 77 AVENUE  
SUITE4 202  
MIAMI, FL 33156 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: D  
Name: BETANCOURT, GEMMA M  
Address: 5001 GRANADA BLVD  
City-St-Zip: MIAMI, FL 33146

Title: D  
Name: GLOVER, PATRICIA  
Address: 11301 PEACHTREE DR  
City-St-Zip: MIAMI, FL 33161

Title: D  
Name: RUIZ, NOREL  
Address: 9840 SW 77 AVENUE  
City-St-Zip: MIAMI, FL 33156

I hereby 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 all other like empowered.

SIGNATURE: PATRICIA GLOVER

D

04/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date