

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 01, 2005 8:00 am
Secretary of State

02-01-2005 90034 002 ****61.25

DOCUMENT # 729922

1. Entity Name

**ASOCIACION DE ANTIGUAS ALUMNAS NUESTRA SENORA
DE LOURDES, INC.**



Principal Place of Business

**1540 SW 14 TERR
MIAMI FL 33145
US**

Mailing Address

**1540 SW 14 TERR
MIAMI FL 33145
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0166334

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**AGUABELLA, (CARMEN)
3740 SW 129 AVE
MIAMI FL 33175**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **P**
STREET ADDRESS **MILANES, MIREYA P**
CITY-ST-ZIP **9490 SW 54TH COURT
MIAMI FL 33165**

TITLE ☐ Delete
NAME **S**
STREET ADDRESS **ALEMAN, GUADALUPE D**
CITY-ST-ZIP **8025 SW 81ST STREET
MIAMI FL 33157** *16991 SW 113CT #67*

TITLE ☐ Delete
NAME **VP**
STREET ADDRESS **CORDOVA-RAMIREZ, PERLA**
CITY-ST-ZIP **3121 SW 120TH COURT
MIAMI FL 33175**

TITLE ☐ Delete
NAME **VTRE**
STREET ADDRESS **RIVERO, PILAR R**
CITY-ST-ZIP **3620 SW 18TH TERRACE
MIAMI FL 33145**

TITLE ☐ Delete
NAME **MD**
STREET ADDRESS **AGUABELLA, CARMEN**
CITY-ST-ZIP **3740 SW 129TH AVE
MIAMI, FL 00000**

TITLE ☐ Delete
NAME **ID**
STREET ADDRESS **GONZALEZ-PITA, MARIA**
CITY-ST-ZIP **1540 S W 14 TERR
MIAMI FL 33145**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Maria Gonzalez-Pita
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/26/05- 8582049
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