

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 8:00 am
Secretary of State

04-14-2008 90046 002 ****61.25

DOCUMENT # 731049

1. Entity Name
COLOMBIAN VOLUNTEER LADIES, INCORPORATED



Principal Place of Business
**C/O GLORIA V. QUINTERO
7050 SW 107TH STREET
MIAMI, FL 33156 US**

Mailing Address
**C/O GLORIA V. QUINTERO
7050 SW 107TH STREET
MIAMI, FL 33156 US**

40067899



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04112008 Chg-NP CR2E037 (12/06)

4. FEI Number
51-0154982

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

**FERNANDEZ, RAFAEL J CPA
10737 S 104 STREET
MIAMI, FL 33176**

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

**Filing Fee is \$61.25
Due by May 1, 2008**

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 PD ☐ Delete
NAME QUINTERO, GLORIA V.
STREET ADDRESS 7050 SW 107TH STREET
CITY-ST-ZIP MAMIAMI, FL 33156

TITLE TD ☒ Delete
NAME MARTIN, FRIDA
STREET ADDRESS 315 WOODCREST RD.
CITY-ST-ZIP KEY BISCAYNE, FL 33149

TITLE S ☐ Delete
NAME ELIZABETH, GOMEZ
STREET ADDRESS 150 S.E. APT 9B
CITY-ST-ZIP MIAMI, FL 33129

TITLE VPD ☐ Delete
NAME GOMEZ, GLADYS
STREET ADDRESS 11640 SW 70TH AVE
CITY-ST-ZIP MIAMI, FL 33156

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE T.D. ☒ Change ☐ Addition
NAME MARIA T. FABRE
STREET ADDRESS 9405 SW 91 STREET
CITY-ST-ZIP MIAMI, FL 33176

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

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

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

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 exemptions contained 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 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:

Gloria V. Quintero April 11/08 305-662-4252
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #