2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#731049

FILED Apr 22, 2009 Secretary of State

Entity Name: COLOMBIAN VOLUNTEER LADIES, INCORPORATED

Current Principal Place of Business:

New Principal Place of Business:

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

C/O GLORIA V. QUINTERO 7050 SW 107TH STREET PINECREST, FL 33156

Current Mailing Address:

New Mailing Address:

FEI Number Not Applicable ()

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

C/O GLORIA V. QUINTERO 7050 SW 107TH STREET PINECREST, FL 33156

FEI Number: 51-0154982

FEI Number Applied For ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

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

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete QUINTERO, GLORIA V. Name: Address: City-St-Zip:

7050 SW 107TH STREET MMIAMI, FL 33156

Title: TD () Delete FABRE, NARIA Name: Address: 9405 SW 91 STREET City-St-Zip: MIAMI, FL 33176

Title: () Delete ELIZABETH, GOMEZ Name: 150 S.E. APT 9B Address: City-St-Zip: MIAMI, FL 33129

Title: VPD () Delete Name: GOMEZ, GLADYS Address: 11640 SW 70TH AVE City-St-Zip: MIAMI, FL 33156

(X) Change () Addition QUINTERO, GLORIA V PRES. Name: Address: 7050 SW 107TH STREET City-St-Zip: PINECREST, FL 33156 US

Title: (X) Change () Addition

Name: FABRE, MARIA TREAS. Address: 9405 SW 91 STREET City-St-Zip: MIAMI, FL 33176 US

Title: (X) Change () Addition ELIZABETH, GOMEZ SEC, Name: 150 SE. 25TH ROAD, APT 9B Address: City-St-Zip: MIAMI, FL 33129 US

Title: VPD (X) Change () Addition

Name: GOMEZ, GLADYS VP Address: 11640 SW 70TH AVE City-St-Zip: PINECREST, FL 33156 US

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: GLORIA V. QUINTERO

PD

04/22/2009