

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 02, 2008 8:00 am
Secretary of State

06-02-2008 90004 024 ****61.25

DOCUMENT # 739751							
1. Entity Name ASOCIACION DE ESPIRITUANOS EN EL EXILIO, INC.							
Principal Place of Business 4501 PALM AVE STE #104 HIALEAH, FL 33012 US		Mailing Address P.O. BOX 350974 RIVERSIDE STATION MIAMI, FL 33135 US					
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	4. FEI Number 59-1847803			
				Applied For Not Applicable			
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
RODRIGUEZ & URIARTE TAX SERVICE 4501 PALM AVE STE 104 HIALEAH, FL 33012			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>							
Filing Fee is \$61.25 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	GARCIA, AMADO LUIS		NAME				
STREET ADDRESS	4304 SW 69TH AVE		STREET ADDRESS				
CITY-ST-ZIP	MIAMI, FL 33155		CITY-ST-ZIP				
TITLE	VPD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	BORREGO, LOURDES		NAME				
STREET ADDRESS	1028 SW 69TH TERRACE		STREET ADDRESS				
CITY-ST-ZIP	MIAMI, FL 33173		CITY-ST-ZIP				
TITLE	SD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	SANCHEZ, JOSE		NAME				
STREET ADDRESS	6914 STIRLING RD		STREET ADDRESS				
CITY-ST-ZIP	HOLLYWOOD, FL 33024		CITY-ST-ZIP				
TITLE	TD	<input checked="" type="checkbox"/> Delete	TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	RODRIGUEZ, MARIO		NAME	Gutierrez, Taydi			
STREET ADDRESS	4501 PALM AVE STE 104		STREET ADDRESS	13319 SW 284 Street			
CITY-ST-ZIP	HIALEAH, FL 33012		CITY-ST-ZIP	Miami, FL 33033			
TITLE	VSD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	FERNANDEZ, MARTHA		NAME				
STREET ADDRESS	1865 JF KENNEDY CAYSEWAY		STREET ADDRESS				
CITY-ST-ZIP	N BAY VILLAGE, FL 33141		CITY-ST-ZIP				
TITLE	VTD	<input checked="" type="checkbox"/> Delete	TITLE	VTD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	DE LA PORTILLA, MARIA CONCHA		NAME	Delgado, Cesar			
STREET ADDRESS	13411 SW 6TH ST		STREET ADDRESS	13319 SW 284 Street			
CITY-ST-ZIP	MIAMI, FL 33184		CITY-ST-ZIP	Miami, FL 33033			
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: <i>[Signature]</i> PRESIDENT			5/29/08		305-661-6004		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		Daytime Phone #		