2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED DOCUMENT # 740357 Feb 12, 2007 08:00 AM 1. Entity Namo **Secretary of State** MUNICIPIO DE MORON EN EXILIO, INC. . Principal Place of Business Mailing Address 6825 WEST FLAGLER STREET P. O. BOX 440622 P. O. BOX 440622 P. O. BOX 440622 MIAMI FL 33144-9830 MIAMI FL 33144-9830 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) Applied For City & State City & State 4. FEI Number NO-T APPLICABLE Not Applicable Zıp Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SORI, HECTOR Street Address (P.O. Box Number is Not Acceptable) 120 NW 86TH COURT **MIAMI FL 33126** Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered effice 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) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2007 Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Addition TITLE ☐ Delete шп Change U00000632333 NAME OTERO, LAZARA NAME 02/21/07-80017-025 61.25 STREET ADDRESS STREET ADDRESS 2142 NW 74TH ST CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33142 THE Delete HILE Change Addition VTD NAME NAME: CASTANEDA, OSCAR STREET ADDRESS STREET ADDRESS 998 W. 65TH STREET CITY - \$1 - 71P HIALEAH FL 33012 CHY-ST-7/P □ Change Addition TITLE Delete THUE SD NAME NAMI DOMINGUEZ, RENE STREET ADDRESS STREET LADORESS 8414 NW 1 TERR CHY-SI-ZIP CHY-ST-ZIP MIAMI FL 33126 TITLE Delete IIIIE □ Change Addition NAMI NAM CLAVIJO, EDUARDO A STREET ADDRESS STREET ADDRESS 6061 COLLINS AVE APT 9F CITY-ST-7IP CITY-ST-7IP MIAMI BEACH FL 33140 Delete Change Addition HIII шп STREET ADDRESS STREET ADDRESS City-St-703 CHY-ST-ZIP □ Change Addition TITLE ☐ Delete HILE NAME NAME STREET ADDRESS STREET ADDRESS

12. I horeby cortify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes | 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 eath, 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 tike empowered.

SIGNATURE: _

ESUARDO CCAVIJO

CITY-ST-ZIP