

**2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # 740523  
1. Entity Name  
AMOR EN ACCION, INC.



Principal Place of Business      Mailing Address  
9400 SW 88 TERR      9400 SW 88 TERR  
MIAMI, FL 33176      MIAMI, FL 33176

**DO NOT WRITE IN THIS SPACE**



04142005 No Chg-NP      CR2E037 (10/03)

4. FEI Number      Applied For  
59-2354447      Not Applicable

5. Certificate of Status Desired       \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
  
PEREZ, LUIS  
SUN TRUST BUILDING  
1 SE 3RD AVENUE, FLOOR 27  
MIAMI, FL 33131

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IN THIS SPACE**

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 the if applicable      (NOTE: Registered Agent signature required when reinstating)      DATE

**Filing Fee is \$61.25  
Due by May 1, 2005**

9. Election Campaign Financing      \$5.00 May Be  
Trust Fund Contribution.       Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MARILL, ALICIA 6367 S.W. 15TH STREET MIAMI FL, 33144
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ROVIRA, LOURDES 9400 SW 88 TERR MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHIRINO, JOSEFINA 4550 NW 5 ST MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CUETO, CARLOS 13191 SW 20 STREET MIAMI, FL 33184
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUAREZ, OLGA M 145 SE 25 RD APT. 1102 MIAMI, FL 33129
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000350258  
05/02/05-80098-008 61.25

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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: Loures C. Rovira      LOURDES C. ROVIRA      4/13/05      (305) 275-0919  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #