

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740787

FILED  
Mar 18, 2009  
Secretary of State

Entity Name: DEPORTIVO DE FOMENTO, INC.

## Current Principal Place of Business:

P.O. BOX 112195  
HIALEAH, FL 330112195 US

## New Principal Place of Business:

1850 W. 56 ST.  
2112  
HIALEAH, FL 33012 US

## Current Mailing Address:

P.O. BOX 112195  
HIALEAH, FL 330112195 US

## New Mailing Address:

FEI Number: 65-0151779      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DELVALLE, AVILIO  
1850 W 56TH ST APT #2112  
HIALEAH, FL 33012 US

## Name and Address of New Registered Agent:

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:

Title: P ( ) Delete  
Name: SUSANA NASCO, OLGA  
Address: 295 W. 62 ST  
City-St-Zip: HIALEAH, FL 33013

Title: T ( ) Delete  
Name: GONZALEZ, REINERIO  
Address: 295 E. 26 ST  
City-St-Zip: HIALEAH, FL 33012

Title: D ( ) Delete  
Name: DELVALLE, AVILIO  
Address: 1850 W 56 ST APT 2112  
City-St-Zip: HIALEAH, FL

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S ( ) Change (X) Addition  
Name: CALBINO, AURORA  
Address: 6950 W. 6 AVE #215  
City-St-Zip: HIALEAH, FL 33014

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: AVILIO DEL VALLE

D

03/18/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date