

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 18, 2009
Secretary of State**

DOCUMENT# 740787

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. 28 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