2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Sep 03, 2009 **DOCUMENT# 743650** Secretary of State

Entity Name: SER-JOBS FOR PROGRESS, INC.

Current Principal Place of Business: New Principal Place of Business:

5600 NW 36 STREET #561 MIAMI, FL 33166

Current Mailing Address: New Mailing Address:

P.O. BOX 661597 MIAMI, FL 332661597

FEI Number: 59-1849595 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CELA, JOSE L 5600 NW 36 STREET #561 MIAMI, FL 33166

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete TERRELONGE, RICHARD LLANO MONTES, DANIEL Name: Name: 12342 SW 140 ST Address: 14140 SW 40 TERRACE Address:

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33173

Title: TREA Title: () Delete () Change () Addition GODOY, EDUARDO Name: Name:

Address: 1111 BRICKELL AVE # 2801 Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip:

Title: () Delete Title: () Change () Addition

BERUVIDES, MARCELO Name: Name: Address: 3121 SW 82 CT Address: City-St-Zip: MIAMI, FL 33155 City-St-Zip:

Title: VC () Delete Title: (X) Change () Addition

Name: LLANO, DANIEL Name: CHAVES, MELVIN 14140 SW 40 TERRACE Address: Address: 9700 SW 115 TERRACE City-St-Zip: MIAMI, FL 33173 City-St-Zip: MIAMI, FL 33176

Title: () Delete Title: () Change () Addition

ADDERLY, TO Name: Name: 18850 NW 14 AVE RD Address: Address: City-St-Zip: MIAMI GARDENS, FL 33169 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

CHAVES, MELVIN TERRELOGNE, RICHARD Name: Name: Address: 9700 SW 115 TERRACE Address: 12342 SW 140 ST MIAMI, FL 33176 MIAMI, FL 33186 City-St-Zip: City-St-Zip:

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: JOSE L CELA **PRES** 09/03/2009

Electronic Signature of Signing Officer or Director

Date