

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 12, 2007 08:00 AM
Secretary of State

DOCUMENT # 761063 1. Entity Name WYNWOOD COMMUNITY ECONOMIC DEVELOPMENT CORPORATION, INC.	
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Principal Place of Business 2235 N.W. 5 AVE #100 MIAMI, FL 33127 US	Mailing Address 8001 SW 97 TERR. MIAMI, FL 33156
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DO NOT WRITE IN THIS SPACE



02082007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2152061	Applied For Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

LITTLE, JOHN
3000 BISCAYNE BLVD.
#500
MIAMI, FL 33137

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office to the ~~registered office~~ of ~~the~~ familiar with, the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if ~~applicable~~ registered Agent signature required ~~if~~ ~~not~~ ~~applicable~~

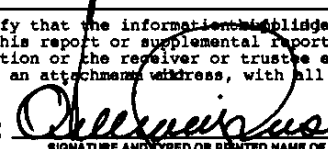
Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	02/21/07-80012-007 61.25
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D RIOS, WILLIAM 2235 NW 5 AVE. MIAMI, FL 33127
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D VELAZQUEZ, NILSA 8630 NE 1 CT. MIAMI, FL 33137
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D RIVERA, GAMALIEL 8601 FEDERAL HWY. MIAMI, FL 33137
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information in this report is true and accurate and that my signature shall be the same as the signature of the officer or of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 19, Florida Statutes, if the information has changed, or on an attachment address, with all other like empowered.

SIGNATURE:  **2-07-07** **305-274-0992**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #