

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763966

FILED  
Mar 17, 2009  
Secretary of State

**Entity Name:** SHRINE OF OUR LADY OF REGLA, INC.

**Current Principal Place of Business:**

1920 S.W. 6 ST.  
MIAMI, FL 331353208 US

**New Principal Place of Business:**

**Current Mailing Address:**

1920 S.W. 6 ST.  
MIAMI, FL 331353208 US

**New Mailing Address:**

**FEI Number:** 59-1102060

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LOBO, REV. MICHAEL F.  
1920 SW 6TH ST.  
MIAMI, FL 33135 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: PD ( ) Delete  
Name: LOBO, REV. MICHAEL F  
Address: 1920 SW 6TH ST  
City-St-Zip: MIAMI, FL

Title: VD ( ) Delete  
Name: JOO, PEDRO S  
Address: 2630 SW 33RD CT.  
City-St-Zip: MIAMI, FL 331332808

Title: TD ( ) Delete  
Name: CAMOIRA, CARMEN  
Address: 3146 SW 22 TERRACE  
City-St-Zip: MIAMI, FL

Title: D ( ) Delete  
Name: ROBIE, BRUCE W.  
Address: 2163 NE 179TH ST  
City-St-Zip: MIAMI, FL 33162

Title: D ( ) Delete  
Name: CHAVEZ, MERCEDES  
Address: 2365 SW 16TH ST  
City-St-Zip: MIAMI, FL 33145

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: TSD (X) Change ( ) Addition  
Name: CAMOIRA, CARMEN  
Address: 3146 SW 22 TERRACE  
City-St-Zip: MIAMI, FL

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: REV. MICHAEL F. LOBO

P

03/17/2009

Electronic Signature of Signing Officer or Director

Date