## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 767337** 

FILED Feb 07, 2007 Secretary of State

Entity Name: FEDERACION EX-ALUMNAS SALESIANAS, INC.

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

11511 SW 100 ST MIAMI, FL 33176 US

Current Mailing Address: New Mailing Address:

P.O. BOX 55-8852 MIAMI, FL 33155 US

FEI Number: 59-2535187 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:

 MAGDA;EMA, LATORRE
 MAGDALEMA, LATORRE

 1151 SW 100 ST
 1151 SW 100 ST

 MIAMI, FL 33176
 US

 MIAMI, FL 33176
 US

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: MAGDALENA LATORRE 02/07/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: VTS (X) Change ( ) Addition Name: LATORRE, MAGDA G Name: LATORRE, MAGDA G

Address: 11511 SW 100 ST Address: 11511 SW 100 ST

City-St-Zip: MIAMI, FL 33176

City-St-Zip: MIAMI, FL 33176

Title: T ( ) Delete Title: T (X) Change ( ) Addition Name: BAZAN, ELOINA Z Name: ZAYA-BAZAN, ELOINA

 Name:
 BAZAN, ELONA Z
 Name:
 ZATA-BAZAN, ELONA

 Address:
 11511 SW 100 ST
 Address:
 2814 SW 92 COURT

 City-St-Zip:
 MIAMI, FL 33176
 City-St-Zip:
 MIAMI, FL 33165

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

 Name:
 KIRSY, MARIA
 Name:
 KIRSY, MARIA

 Address:
 11511 SW 100 ST
 Address:
 5021 SW 92 TERRACE

 City-St-Zip:
 MIAMI, FL 33176
 City-St-Zip:
 COOPER CITY, FL 33328

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

 Name:
 Name:
 CUTIE, YOLANDA B

 Address:
 Address:
 6521 SW 106 AVE

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MAGDALENA LATORRE S 02/07/2007