

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F86808

Entity Name: LOS GUIRENOS, INC.

FILED
Feb 27, 2009
Secretary of State

Current Principal Place of Business:

C/O FRANCISCO VELOSO
2160 SW 8TH ST
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

C/O FRANCISCO VELOSO
2160 SW 8TH ST
MIAMI, FL 33135

New Mailing Address:

FEI Number: 59-2208132

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VELOSO, FRANCISCO
8925 COLLINS AVE, APT 10D
SURFSIDE, FL 33154 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VELOSO, FRANCISCO,
Address: 8925 COLLINS AVE APT 10D
City-St-Zip: SURFSIDE, FL 33154

Title: ST () Delete
Name: VELOSO, ANA,
Address: 8925 COLLINS AVE, APT 10D
City-St-Zip: SURFSIDE, FL 33154

Title: T () Delete
Name: VELOSO, FRANK MIGUEL
Address: 8925 COLLINS AVE APT 10D
City-St-Zip: SURFSIDE, FL 33154

Title: T () Delete
Name: VELOSO, JAVIER MIGUEL
Address: 8925 COLLINS AVE #10D
City-St-Zip: SURFSIDE, FL 33154

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: () 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANA VELOSO

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02/27/2009

Electronic Signature of Signing Officer or Director

Date