2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004258

FILED May 21, 2008 Secretary of State

Entity Name: HIALEAH CONCERNED FAMILIES, CORP.

Current Principal Place of Business:		New Prince	New Principal Place of Business:	
	ST 4TH LANE , FL 33014			
Current P	Mailing Address:	New Maili	ing Address:	
	ST 4TH LANE , FL 33014			
	r: 65-0353821 FEI Number Applied For () FEI nce with s. 607.193(2)(b), F.S., the corporation did not rece	l Number Not App	• • • • • • • • • • • • • • • • • • • •	
Name an	d Address of Current Registered Agent:	Name and	I Address of New Registered Agent:	
	BERTO ST 4TH LANE , FL 33014 US			
	e named entity submits this statement for the purposte of Florida.	se of changing	its registered office or registered agent, or both,	
SIGNATU	IRE:			
	Electronic Signature of Registered Agent		Date	
OFFICER	S AND DIRECTORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () Delete DIAZ, ALBERTO 7840 WEST 4TH LANE HIALEAH, FL 33014	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VD () Delete GARCIA, BERNARDO	Title: Name:	() Change () Addition	
Address: City-St-Zip:	3881 EAST 8TH COURT HIALEAH, FL 33014	Address: City-St-Zip:		
	HIALEAH, FL 33014 SD () Delete DEL CASTILLO, EMMA C 7994 W. 34 COURT	Address:	SD (X) Change () Addition DEL CASTILLO, EMMA C 7994 W. 34 COURT HIALEAH, FL 33018	
City-St-Zip: Title: Name: Address:	HIALEAH, FL 33014 SD () Delete DEL CASTILLO, EMMA C 7994 W. 34 COURT	Address: City-St-Zip: Title: Name: Address:	DEL CASTILLO, EMMA C 7994 W. 34 COURT	
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	HIALEAH, FL 33014 SD () Delete DEL CASTILLO, EMMA C 7994 W. 34 COURT HIALELEAH, FL 33018 TD () Delete DIAZ, IVETTE 7840 WEST 4TH LANE HIALEAH, FL 33013 VTD () Delete DIAZ, LETICIA 60 EAST 42ND STREET	Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	DEL CASTILLO, EMMA C 7994 W. 34 COURT HIALEAH, FL 33018	

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: EMMA DEL CASTILLO SD 05/21/2008