

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005392

FILED
Aug 07, 2008
Secretary of State

Entity Name: LATIN AMERICAN HORIZONS INC.

Current Principal Place of Business:

3301 N.E 5TH AV.
APT. 1109
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

3301 N.E 5TH AV.
APT. 1109
MIAMI, FL 33137

New Mailing Address:

9000 SHERIDAN STREET
138
PEMBROKE PINES, FL 33024

FEI Number: 65-1090193 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FRANKY, CARLOS
3301 N.E 5TH AV.
APT. 1109
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

RCG ACCOUNTING & ASSOCIATES, INC.
9000 SHERIDAN STREET
138
PEMBROKE PINES, FL 33024 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: RCG ACCOUNTING & ASSOCIATES

08/07/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: APONTE, CLAUDIA
Address: 3301 N.E 5TH AV. APT. 1109
City-St-Zip: MIAMI, FL 33137

Title: D () Delete
Name: STAND, RAFAEL
Address: 3301 N.E 5TH AV. APT. 1109
City-St-Zip: MIAMI, FL 33137

Title: D () Delete
Name: FRANKY, CARLOS
Address: 3301 N.E 5TH AV. APT. 1109
City-St-Zip: MIAMI, FL 33137

Title: P () Delete
Name: BRÜCKER, CHRISTIAN
Address: 3301 N.E 5TH AV. APT. 1109
City-St-Zip: MIAMI, FL 33137

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

SIGNATURE: CLAUDIA APONTE

D

08/07/2008

Electronic Signature of Signing Officer or Director

Date