## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000007379

FILED Mar 30, 2009 Secretary of State

Entity Name: CENTRO DE ENSENANZA MESIANICA "SAR SHALOM", INC.

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

3195 WEST 7TH AVENUE 775 W 83 S

HIALEAH, FL 33012 HIALEAH, FL 33014

Current Mailing Address: New Mailing Address:

19713 N.W 49TH PL 19713 N.W 49TH PL

CAROL CITY, FL 33055 US MIAMI GARDENS, FL 33055 US

FEI Number: 65-1068028 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

FERRER, ZULAY
19713 N.W. 49TH PLACE
FERRER, ZULAY
19713 N.W. 49TH PLACE

CAROL CITY, FL 33055 US MIAMI GARDENS, FL 33055 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: 03/30/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 FERRER, WILLIAM
 Name:
 FERRER, WILLIAM

 Address:
 19713 N.W. 49TH PLACE
 Address:
 19713 N.W. 49TH PLACE

 City-St-Zip:
 CAROL CITY, FL 33055
 City-St-Zip:
 MIAMI GARDENS, FL 33055

Title: VPD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 OSORIO, SANTIAGO
 Name:

 Address:
 1450 NW 36 AVE
 Address:

 City-St-Zip:
 MIAMI, FL 33125
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SIFONTES, MIRIAM C
 Name:

 Address:
 9350 W. FLAGLER ST #206 B
 Address:

 City-St-Zip:
 MIAMI, FL 33174
 City-St-Zip:

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

 Name:
 FERRER, ZULAY
 Name:
 FERRER, ZULAY

 Address:
 19713 N.W. 49TH PLACE
 Address:
 19713 N.W. 49TH PLACE

 City-St-Zip:
 CAROL CITY, FL 33055
 City-St-Zip:
 MIAMI GARDENS, FL 33055

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: ZULAY FERRER TD 03/30/2009