

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000253

FILED
Apr 30, 2007
Secretary of State

Entity Name: ESTRELLA MORENA FUEGO FLAMENCO, INC.

Current Principal Place of Business:

3560 SW 84 AVENUE
MIAMI, FL 331553314

New Principal Place of Business:

Current Mailing Address:

3560 SW 84 AVENUE
MIAMI, FL 331553314

New Mailing Address:

FEI Number: 65-1067841

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ZORRILLA, LOUISE
3560 SW 84TH AVENUE
MIAMI, FL 33155 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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ZORRILLA, LOUISE
Address: 3560 SW 84 AVENUE
City-St-Zip: MIAMI, FL 331553314

Title: TD () Delete
Name: ZORRILLA, JOSE
Address: 3560 SW 84 AVENUE
City-St-Zip: MIAMI, FL 331553314

Title: MD () Delete
Name: ZORRILLA, JOSELUIS
Address: 3560 SW 84 AVE
City-St-Zip: MIAMI, FL 33155

Title: SD () Delete
Name: CAREAS, IVETTE
Address: 3560 SW 84 AVE
City-St-Zip: MIAMI, FL 33155

Title: S () Delete
Name: CARNEY, AMANDA
Address: 3560 SW 84 AVE
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MD (X) Change () Addition
Name: ZORRILLA, JOSE LUIS
Address: 3560 SW 84 AVE
City-St-Zip: MIAMI, FL 33155

Title: SD (X) Change () Addition
Name: CARCAS, IVETTE
Address: 3560 SW 84 AVE
City-St-Zip: MIAMI, FL 33155

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: LOUISE ZORRILLA

DP

04/30/2007

Electronic Signature of Signing Officer or Director

Date