

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001407

FILED  
Jan 08, 2009  
Secretary of State

**Entity Name:** DON JULIO, ANTIGUOS EMPLEADOS DE EL ENCANTO, INC.

**Current Principal Place of Business:**

9625 SW 24 STREET #C-107  
MIAMI, FL 331658045 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 65-1026  
MIAMI, FL 332651026 US

**New Mailing Address:**

**FEI Number:** 65-1087157

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MIYARES, JULIAN D MR  
9625 SW 24 STREET #C-107  
MIAMI, FL 331658045 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: DS ( ) Delete  
Name: MIYARES, JULIAN D  
Address: 9625 SW 24 STREET #107  
City-St-Zip: MIAMI, FL 331658045

Title: DP ( ) Delete  
Name: GONZALEZ, JACINTO  
Address: 6735 S.W. 16 STREET  
City-St-Zip: MIAMI, FL 33155

Title: DVP ( ) Delete  
Name: TORRENS, MARIA J  
Address: 1776 JAMES AVENUE #15 D  
City-St-Zip: MIAMI BEACH, FL 33139

Title: DVT ( ) Delete  
Name: BLANCO, VICTOR  
Address: 9223 S.W. 39 ST.  
City-St-Zip: MIAMI, FL 33165

Title: DT ( ) Delete  
Name: PAYRET, ELIA H  
Address: 9682 FOUNTAINBLEAU BLVD. #204  
City-St-Zip: MIAMI, FL 33172

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: DVP (X) Change ( ) Addition  
Name: TORRENS, MARIA J  
Address: 1776 JAMES AVENUE # 5 D  
City-St-Zip: MIAMI BEACH, FL 33139

Title: DVT (X) Change ( ) Addition  
Name: BLANCO, VICTOR  
Address: 10911 S.W. 112 STREET, APT. # B-201  
City-St-Zip: MIAMI, FL 33176

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: JULIAN DARO MIYARES

MR.

01/08/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date