

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002209

FILED  
Mar 28, 2009  
Secretary of State

Entity Name: POR LA DEMOCRACIA ONG. INC.

## Current Principal Place of Business:

SHENANDOAH STATION  
P.O. BOX 45-1624  
MIAMI, FL 332451624

## New Principal Place of Business:

2154 SW 14 TERR  
SUITE 5  
MIAMI, FL 33145

## Current Mailing Address:

SHENANDOAH STATION  
P.O. BOX 45-1624  
MIAMI, FL 332451624

## New Mailing Address:

2154 SW 14 TERR  
SUITE 5  
MIAMI, FL 33145

FEI Number: 65-1090956

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GOMEZ, LIONEL  
2154 S.W. 14 TERRACE  
SUITE 1  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

GOMEZ, LIONEL  
2154 S.W. 14 TERRACE  
SUITE 5  
MIAMI, FL 33145 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: LIONEL GOMEZ

03/28/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GOMEZ, LIONEL  
Address: 2154 S.W. 14 TERRACE, SUITE 1  
City-St-Zip: MIAMI, FL 33145

Title: VD ( ) Delete  
Name: FAURA, WALDO  
Address: 2154 S.W. 14 TERRACE, SUITE 1  
City-St-Zip: MIAMI, FL 33145

Title: TD ( ) Delete  
Name: GONZALEZ, JOSEFINA  
Address: 2154 S.W. 14 TERRACE, SUITE 1  
City-St-Zip: MIAMI, FL 33145

Title: D ( ) Delete  
Name: PINO, LUIS  
Address: 2154 SW 14 TERRACE, SUITE 1  
City-St-Zip: MIAMI, FL 33145

Title: D ( ) Delete  
Name: BOTFALUSI-STOCK, EDE  
Address: 2154 SW 14 TERRACE, SUITE 1  
City-St-Zip: MIAMI, FL 33145

Title: D ( ) Delete  
Name: ABELLO, ORLANDO  
Address: 2154 SW 14 TERRACE, SUITE 1  
City-St-Zip: MIAMI, FL 33145

## 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:

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: LIONEL GOMEZ

PRES

03/28/2009

Electronic Signature of Signing Officer or Director

Date