

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000002218

**FILED**  
**Jan 31, 2010**  
**Secretary of State**

**Entity Name:** PHILANTHROPIC EDUCATIONAL AND CULTURAL EVOLVEMENT COMMUNITY DEVELOPMENT AND BETTERMENT OUTREACH CORPORATION INC.

**Current Principal Place of Business:**

18450 SW 134TH AVENUE  
MIAMI, FL 33177 US

**New Principal Place of Business:**

**Current Mailing Address:**

18450 SW 134TH AVENUE  
MIAMI, FL 33177 US

**New Mailing Address:**

**FEI Number:** 65-1103927      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

RODRIGUEZ, JOSE F REV.  
18450 SW 134TH AVENUE  
MIAMI, FL 33177 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:** PD  
**Name:** RODRIGUEZ, JOSE F REV.  
**Address:** 18450 SW 134TH AVENUE  
**City-St-Zip:** MIAMI, FL 33177 US

**Title:** SD  
**Name:** PEREZ, LEXAIDA  
**Address:** 15430 SW 170 TERRACE  
**City-St-Zip:** MIAMI, FL 33187 US

**Title:** TD  
**Name:** CRUZ, MARY C.  
**Address:** 4430 SW 83RD AVENUE  
**City-St-Zip:** MIAMI, FL 33155 US

**Title:** D  
**Name:** HERNANDEZ, HECTOR  
**Address:** 8280 SW 144 STREET  
**City-St-Zip:** MIAMI, FL 33182 US

I hereby 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 all other like empowered.

SIGNATURE: REV. JOSE F. RODRIGUEZ

PD

01/31/2010

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

\_\_\_\_\_  
Date