

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008239

FILED
May 01, 2007
Secretary of State

Entity Name: LOGIA A.J.E.F. HIJOS DE NUEVOS HORIZONTES, INC.

Current Principal Place of Business:

600 WEST 29TH STREET
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

600 WEST 29TH STREET
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 02-0550421 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PEREZ, GUSTAVO J LFREDO
8228 SW 36 STREET
MIAMI, FL 33165 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 () Delete
Name: TEJEDA, DANIEL
Address: 3090 NW 29 ST
City-St-Zip: MIAMI, FL 33126

Title: SD () Delete
Name: MARANJO, ISBEL
Address: 2135 NW 6 ST APT 8
City-St-Zip: MIAMI, FL 33125

Title: TD () Delete
Name: ACOSTA, GIOVANNI
Address: 353 W 59 ST
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TRONCOSO, MICHAEL
Address: 970 W 53 ST
City-St-Zip: HIALEAH, FL 33012

Title: SD (X) Change () Addition
Name: NARANJO, ISBEL
Address: 2135 NW 6 ST APT 8
City-St-Zip: MIAMI, FL 33125

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: GIOVANNI ACOSTA

TD

05/01/2007

Electronic Signature of Signing Officer or Director

Date