

# 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED  
07 MAY -7 AM 7:39

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA



04182007 Chg-NP CR2E037 (12/06)

4. FEI Number  
65-1157522

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

RAUL, AGUILERA  
2200 NW 102 AVE  
#5  
DORAL, FL 33172

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City  
FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Raul Aguilera*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make check payable to  
Florida Department of State

## 10. OFFICERS AND DIRECTORS

TITLE PD  
NAME TOLEDO, MAGALY ☒ Delete  
STREET ADDRESS 333 EAST 3 ST  
CITY-ST-ZIP HIALEAH, FL 33010

TITLE TD  
NAME BARRIENTOS, HUGO ☒ Delete  
STREET ADDRESS 316 EAST 4TH ST  
CITY-ST-ZIP HIALEAH, FL 33010

TITLE SC  
NAME CISNERO, RAMON ☒ Delete  
STREET ADDRESS 341 EAST 3 ST  
CITY-ST-ZIP HIALEAH, FL 33010

TITLE ☐ Delete  
NAME *AS/10*  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE President ☐ Change ☒ Addition  
NAME Pedro Borges  
STREET ADDRESS 341 East 3rd Apt  
CITY-ST-ZIP Hialeah FL 33010

TITLE V Pres ☐ Change ☒ Addition  
NAME Juan Portillo  
STREET ADDRESS 317 East 4th St Apt 202  
CITY-ST-ZIP Hialeah FL 33010

TITLE Treasurers ☐ Change ☒ Addition  
NAME Carmen Arde  
STREET ADDRESS 316 East 4th St Apt 5  
CITY-ST-ZIP Hialeah FL 33010

TITLE Secretary ☐ Change ☒ Addition  
NAME Richard Solana  
STREET ADDRESS 333 East 4th St Apt 5  
CITY-ST-ZIP Hialeah FL 33010

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Raul Aguilera*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

4/27/07