

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 08, 2009
Secretary of State**

DOCUMENT# N01000008811

Entity Name: TEPEYAC MISSION, INC.

Current Principal Place of Business:

4415 HOLLY DRIVE
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

4415 HOLLY DRIVE
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 03-0379802 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZAPATA, JAIME
4415 HOLLY DRIVE
PALM BEACH GARDENS, FL 33410 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: ZAPATA, JAIME
Address: 4415 HOLLY DR
City-St-Zip: PALM BEACH GARDENS, FL US

Title: TD () Delete
Name: CARRILLO, MATILDE
Address: 3 HALIDON COURT
City-St-Zip: WEST PALM BEACH, FL 33418

Title: VD () Delete
Name: CEDIEL, RAFAEL
Address: 157-80 78TH DRIVE N
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: SD () Delete
Name: SILVESTRE, MAYNOR
Address: 4655 ARTHUR ST
City-St-Zip: PALM BEACH GARDENS, FL 33418

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:

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: JAIME ZAPATA

Electronic Signature of Signing Officer or Director

MR.

03/08/2009

Date