

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000009015

FILED  
Mar 21, 2012  
Secretary of State

**Entity Name:** SPECIAL CITY FOR SPECIAL PEOPLE, INC.

**Current Principal Place of Business:**

8280 NW 27 ST  
503  
DORAL, FL 33122

**New Principal Place of Business:**

11200 SW 107 AVE  
MIAMI, FL 33176 UN

**Current Mailing Address:**

8280 NW 27 ST  
503  
DORAL, FL 33122

**New Mailing Address:**

11200 SW 107 AVE  
MIAMI, FL 33176 UN

**FEI Number:** 80-0005358

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GONZALEZ, MARIA D  
8280 NW 27 ST  
503  
DORAL, FL 33122 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: P  
Name: GENOVA, ANTHONY M  
Address: 8280 NW 27 ST  
City-St-Zip: DORAL, FL 33122

Title: S  
Name: ORTA, PABLO J  
Address: 8280 NW 27 ST  
City-St-Zip: DORAL, FL 33122

Title: T  
Name: HERNANDEZ, NELVYS  
Address: 8280 NW 27 ST  
City-St-Zip: DORAL, FL 33122

Title: D  
Name: GONZALEZ, JORGE  
Address: 8280 NW 27 ST  
City-St-Zip: DORAL, FL 33122

Title: D  
Name: AYALA, ELENA  
Address: 8280 NW 27 ST  
City-St-Zip: DORAL, FL 33122

Title: D  
Name: AMEHAZURRA, CLAUDIA  
Address: 8280 NW 27 ST  
City-St-Zip: DORAL, FL 33122

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: ANTHONY GENOVA

OFFI

03/21/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date