

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005373

Entity Name: CHIQUILINAS FOR KIDS, INC.

FILED
May 01, 2004
Secretary of State

Current Principal Place of Business:

9340 FOUNTAINBLEW BLVD
SUITE 314
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

9340 FOUNTAINBLEW BLVD
SUITE 314
MIAMI, FL 33172

New Mailing Address:

FEI Number: 04-3712199 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIDALGO, GISELA
4563 SW 71 AVE
MIAMI, FL 33155 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: D () Delete
Name: MELEAN, SOFIA
Address: 8760 SW 133 AVE RD #319
City-St-Zip: MIAMI, FL 33183

Title: D () Delete
Name: CASTILLO, ERIC
Address: 12525 SW 94 LN
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: MCCANE, LORGIA
Address: 19551 FRANJO RD
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: CABRERA, MARIA
Address: 1212 SW 22 AVE
City-St-Zip: MIAMI, FL

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 for the exemption stated in Section 119.07(3)(i), 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: SOFIA MELEAN

D

05/01/2004

Electronic Signature of Signing Officer or Director

_____ Date