

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02565

FILED  
Jun 30, 2009  
Secretary of State

**Entity Name:** CLUB SOCIAL MAYARI IN EXILE, INC.

**Current Principal Place of Business:**

510 W. 44TH PLACE  
P.O. BOX 350421  
MIAMI, FL 33135

**New Principal Place of Business:**

510 W. 44TH PLACE  
HIALEAH, FL 33012

**Current Mailing Address:**

510 W. 44TH PLACE  
P.O. BOX 350421  
MIAMI, FL 33135

**New Mailing Address:**

510 W. 44TH PLACE  
HIALEAH, FL 33012

**FEI Number:** 65-0014137      **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:**

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

ALVAREZ, RAFAEL  
531 SW 99 AVENUE  
MIAMI, FL 33174 US

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: DP ( ) Delete  
Name: ALVAREZ, RAFAEL  
Address: 531 SW 99 AVE  
City-St-Zip: MIAMI, FL

Title: SD ( ) Delete  
Name: RUIZ, OSCAR  
Address: 7955 SW 12 STREET  
City-St-Zip: MIAMI, FL

Title: TD ( ) Delete  
Name: SANCHEZ, NELSON  
Address: 510 WEST 44TH PLACE  
City-St-Zip: HIALEAH, FL

Title: DVP ( ) Delete  
Name: VINARDELL, ANTONIO  
Address: 9871 SW 28TH STREET  
City-St-Zip: MIAMI, FL 33165

Title: DVT ( ) Delete  
Name: CASTANER, ALFREDO  
Address: 9724 SW 4TH TERRACE  
City-St-Zip: MIAMI, FL 33174

**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:

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: RAFAEL ALVAREZ

DP

06/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date