


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 26, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # N03000000231</b>		
1. Entity Name <b>ASOCIACION DE EX-ALUMNOS DEL COLEGIO AMERICA DEL CALLAO EN LOS ESTADOS UNIDOS, INC</b>		
Principal Place of Business	Mailing Address	
14901 SW 80 ST. 105 MIAMI, FL 33193	14901 SW 80 ST. 105 MIAMI, FL 33193	



06192007 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>52-1776775</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

**6. Name and Address of Current Registered Agent**

**MONTOYA, LUCY G**  
14901 SW 80 ST.  
105  
MIAMI, FL 33193

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25**  
**Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	MONTOYA, LUCY G
STREET ADDRESS	15710 E WATERSIDE CIRCLE 103
CITY-ST-ZIP	SUNRISE, FL 33326
TITLE	S
NAME	CARRASCO, CARLOS F
STREET ADDRESS	10424 SW 188 PL
CITY-ST-ZIP	MIAMI, FL 33186
TITLE	T
NAME	RUBIO, OSCAR
STREET ADDRESS	14901 SW 80 ST.
CITY-ST-ZIP	MIAMI, FL 33193
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000766639  
06/26/07-90003-005 61.25

**DO NOT WRITE  
IN THIS SPACE**

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:** *Lucy Montoya* **LUCY MONTOYA**

**6/15/07 (305) 284-3839**  
Date Daytime Phone #