2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000244

FILED Apr 30, 2007 Secretary of State

Entity Name: MIGRANT WORKERS SOCIETY INC.

Littly Nai	IIIE. WIIGRAMI	WORKERS SOCIETT, INC.		
Current P	rincipal Place	of Business:	New Principal Place	of Business:
	AYA ROAD LM BEACH, FL	. 33413 US		
Current M	lailing Addres	s:	New Mailing Address	s:
	AYA ROAD LM BEACH, FL	. 33413 US		
FEI Number:	: 51-0494641	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
Name and	Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
KISSIMME	E ELM DRIVE E, FL 34743	US		
	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,
SIGNATU				
	Electron	ic Signature of Registered Age	ent	Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Fitle: Name: Address: City-St-Zip:	VP () VARGAS, VIRGI 5707 PAPAYA F W.P.B., FL 334	ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition
Fitle: Name: Address: Dity-St-Zip:	SEC () RAMIREZ-SOLI: 329 53 DRIVE N W.P.B., FL 334	1.	Title: Name: Address: City-St-Zip:	() Change () Addition
Fitle: Name: Address: City-St-Zip:	P () SOLIS, ANTHON 5645 PAPAYA F W.P.B., FL 334	ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition
Γitle: Name:	T () GOULDING, AU	Delete	Title:	

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: VIRGINIA VARGAS VP 04/30/2007