

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000634

Entity Name: MIAMI POSITIVE ACTION, INC.

FILED  
May 01, 2004  
Secretary of State

## Current Principal Place of Business:

1220 71 ST #22  
MIAMI BCH, FL 33141

## New Principal Place of Business:

1006 SW 43RD AVE  
MIAMI, FL 33134

## Current Mailing Address:

1220 71 ST #22  
MIAMI BCH, FL 33141

## New Mailing Address:

1006 SW 43RD AVE  
MIAMI, FL 33134

FEI Number: 20-0015811

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RONDON-LASSEN, LUISA  
1220 71 ST #22  
MIAMI BCH, FL 33141

## Name and Address of New Registered Agent:

RONDON-LASSEN, LUISA  
1006 SW 43RD  
MIAMI, FL 33134

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: LUISA RONDON-LASSEN

05/01/2004

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: RONDON-LASSEN, LUISA  
Address: 1220 71 ST #22  
City-St-Zip: MIAMI BCH, FL 33141

Title: V ( ) Delete  
Name: LAUREANO-VEGA, MANUEL  
Address: 13989 SW 94 CIRCLE LANE #2-102  
City-St-Zip: MIAMI, FL 33186

Title: S (X) Delete  
Name: BRENESKY, SAUL (RON)  
Address: 777 NE 62 ST APT C-111  
City-St-Zip: MIAMI, FL 33138

Title: T (X) Delete  
Name: LOPEZ DE QUINTANA, MARIA ELENA  
Address: 11900 SW 70 AVE  
City-St-Zip: MIAMI, FL 33156

## 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: LUISA RONDON-LASSEN

CEOP

05/01/2004

Electronic Signature of Signing Officer or Director

Date