## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000002372

FILED Feb 12, 2009 Secretary of State

Entity Name: LOGIA ROBERTO DEL PINO NO. 301 - ORDEN CABALLERO DE LA LUZ, INC.

| Current Principal Place of Business:        |  |                                  | New Principal P                             | New Principal Place of Business:            |  |
|---|--|----------------------------------|---|---|--|
| 600 W 29 S<br>HIALEAH,                      |  |                                  |   |   |  |
| Current Mailing Address:                    |  |                                  | New Mailing Ad                              | New Mailing Address:                        |  |
| 6331 NW 3<br>MIAMI, FL                      |  |                                  |   |   |  |
| FEI Number:                                 | 20-0838490   | FEI Number Applied For ( )       | FEI Number Not Applicable (                 | ) Certificate of Status Desired ( )         |  |
| Name and                                    | Address of (   | Current Registered Agent:        | Name and Addre                              | ess of New Registered Agent:                |  |
| GILBERTO<br>6331 NW 3<br>VIRGINIA (         |  | _ 33166 US                       |   |   |  |
|   | named entity<br>e of Florida.                        | submits this statement for the p | urpose of changing its regi                 | stered office or registered agent, or both, |  |
| SIGNATUF                                    |  |                                  |   |   |  |
|   |  | nic Signature of Registered Age  |   | Date  |  |
| OFFICERS                                    | S AND DIREC  | TORS:                            | ADDITIONS/CHA                               | ANGES TO OFFICERS AND DIRECTORS:            |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | D (<br>ALVAREZ, ER/<br>2500 W 3 AVE<br>HIALEAH, FL 3 |                                  | Title:<br>Name:<br>Address:<br>City-St-Zip: | ()Change ()Addition                         |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | D (<br>DIAZ, GILBER'<br>6331 NW 39 T<br>V GARDEN, FL | ERR                              | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                       |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | EVARISTO, ZA<br>8090 NW 99 L                         |                                  | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                       |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | D (<br>DE ARMAS, FL<br>680 E. 14 PL<br>HIALEAH, FL   |                                  | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                     |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | D (<br>GALANO, DOU<br>2340 W 9 CT<br>HIALEAH, FL     |                                  | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                     |  |
| Title:<br>Name:<br>Address:                 | D (<br>IZQUIERDO, R<br>20831 NW 28                   |                                  | Title:<br>Name:<br>Address:                 | ( ) Change ( ) Addition                     |  |

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: GILBERTO DIAZ D 02/12/2009