2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007
Secretary of State

DOCUMENT# N04000004614

Entity Name: ASOCIACION VENGA TU REINO CORP

Current Principal Place of Business:

7955 NW 12 STREET
SUITE 400
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

7955 NW 12 STREET
SUITE 400
MIAMI, FL 33126

New Mailing Address:

FEI Number: 20-1108618 **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:

GOMEZ, BLANCA N
9430 SW 123 COURT
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

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: D ( ) Delete
Name: GOMEZ, BLANCA N
Address: 9430 SW 123 COURT
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete
Name: HIDALGOL, PAULA L SISTER
Address: 9430 SW 123 COURT
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete
Name: CHAPONICK, EVELYN
Address: 10036 SW 165 COURT
City-St-Zip: MIAMI, FL 33196

Title: D ( ) Delete
Name: CASTILLO, ROLANDO I
Address: 5400 S.W. 102 AVE.
City-St-Zip: MIAMI, FL 33165

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 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: EVELYN CHAPONICK D 05/01/2007

Electronic Signature of Signing Officer or Director — Date