## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000005015

Entity Name: CAP. DR. JORGE "TITO" MATOS-POSTIGO INC.

FILED Aug 08, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8650 SW 149 AVE #305 MIAMI, FL 33193

Current Mailing Address: New Mailing Address:

8650 SW 149 AVE #305 MIAMI, FL 33193

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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: Name and Address of New Registered Agent:

ROJAS, RUBEN 8650 SW 149 AVE #305 MIAMI, FL 33193 US

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:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 S
 () Delete
 Title:
 S
 (X) Change () Addition

 Name:
 GARCIA, JORGE
 Name:
 GARCIA-NAVARRO, JORGE

 Address:
 10590 NW 7TH TERR
 Address:
 10590 NW 7TH TERR

 City-St-Zip:
 MIAMI, FL 33172
 City-St-Zip:
 MIAMI, FL 33172

Title: V ( ) Delete Title: T (X) Change ( ) Addition Name: EMMANUELLI, EDUARDO Name: EMMANUELLI, EDUARDO

 Name:
 EMMANUELLI, EDUARDO
 Name:
 EMMANUELLI, EDUARDO

 Address:
 8002 SW 133 PL
 Address:
 8002 SW 133 PL

 City-St-Zip:
 MIAMI, FL 33183
 City-St-Zip:
 MIAMI, FL 33183

Title: P ( ) Delete Title: V (X) Change ( ) Addition Name: MONTALVO, RAMON J Name: MONTALVO, RAMON J

Address: 16000 KINGSMOOR WAY
City-St-Zip: MIAMI LAKES, FL 33166
City-St-Zip: MIAMI LAKES, FL 33166

 Name:
 ROJAS, RUBEN
 Name:
 ROJAS, RUBEN

 Address:
 8650 SW 149 AVE, #305
 Address:
 8650 SW 149 AVE, #305

 City-St-Zip:
 MIAMI, FL 33193
 City-St-Zip:
 MIAMI, FL 33193

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: JORGE GARCIA-NAVARRO S 08/08/2007