

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006747

FILED
Apr 01, 2009
Secretary of State

Entity Name: I.E.C. SOCIAL, EDUCATIONAL & HUMANITARIAN AID, INC.

Current Principal Place of Business:

2500 W OAKRIDGE RD
ORLANDO, FL 32839

New Principal Place of Business:

2500 W OAKRIDGE RD
ORLANDO, FL 32809

Current Mailing Address:

2500 W OAKRIDGE RD
ORLANDO, FL 32839

New Mailing Address:

2500 W OAKRIDGE RD
ORLANDO, FL 32809

FEI Number: 57-1196163

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMOS, VICTOR
2722 DAYBREAK DR.
ORLANDO, FL 32825 US

Name and Address of New Registered Agent:

RAMOS, VICTOR
1421 LUND AVE
KISSIMMEE, FL 34741 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: VICTOR RAMOS

04/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SANCHEZ, TRINIDAD
Address: 229 CHICAGO WOODS CIRCLE
City-St-Zip: ORLANDO, FL 32824

Title: TD () Delete
Name: SANTIAGO, ALFERT
Address: 11247 CARRIAGE CT.
City-St-Zip: ORLANDO, FL 32837

Title: SD () Delete
Name: TAVAREZ, ELIAS
Address: 13513 INLET LANE APT 101
City-St-Zip: ORLANDO, FL 32824

Title: PD () Delete
Name: RAMOS, VICTOR
Address: 2722 DAYBREAK DR.
City-St-Zip: ORLANDO, FL 32825

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: PD (X) Change () Addition
Name: RAMOS, VICTOR
Address: 1421 LUND AVE
City-St-Zip: KISSIMMEE, FL 34741

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: TRINIDAD SANCHEZ

P

04/01/2009

Electronic Signature of Signing Officer or Director

Date