

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000006747

**FILED**  
**Mar 11, 2010**  
**Secretary of State**

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

**Current Principal Place of Business:**

2500 W OAKRIDGE RD  
ORLANDO, FL 32809

**New Principal Place of Business:**

**Current Mailing Address:**

2500 W OAKRIDGE RD  
ORLANDO, FL 32809

**New Mailing Address:**

**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  
1421 LUND AVE  
KISSIMMEE, FL 34741 US

**Name and Address of New Registered Agent:**

DIAZ, ANNIE  
2769 CULLENS CT  
OCOOEE, FL 34761 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: ANNIE DIAZ

03/11/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GONZALEZ, SATURNINO  
Address: 850 WHISPERING CYPRESS LANE  
City-St-Zip: ORLANDO, FL 32824 US

Title: DT  
Name: RAMOS, LUIS  
Address: 7943 SNOWBERRY CR.  
City-St-Zip: ORLANDO, FL 32819 US

Title: SD  
Name: DIAZ, ANNIE  
Address: 2769 CULLENS CT.  
City-St-Zip: OCOEE, FL 34761 US

I hereby 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 all other like empowered.

SIGNATURE: LUIS RAMOS

DT

03/11/2010

Electronic Signature of Signing Officer or Director

Date