

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001016

FILED
Jan 16, 2009
Secretary of State

Entity Name: LUNA LATINOS UNIDOS POR UN NUEVO AMANECER, INC.

Current Principal Place of Business:

19278 WOOD SAGE DR.
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 48336
TAMPA, FL 33647

New Mailing Address:

FEI Number: 20-2203474 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MARTINEZ, DINORAH
19278 WOOD SAGE DR.
TAMPA, FL 33647 US

Name and Address of New Registered Agent:

MARTINEZ TYSON, DINORAH
19278 WOOD SAGE DR.
TAMPA, FL 33647 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: DINORAH MARTINEZ TYSON

01/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPS () Delete
Name: FLORES, ALMA
Address: 1419 NURSERY ROAD
City-St-Zip: CLEARWATER, FL 33756

Title: VPT () Delete
Name: MARTINEZ, DINORAH
Address: 19278 WOOD SAGE DRIVE
City-St-Zip: TAMPA, FL 33647

Title: P () Delete
Name: AGUADO-LOI, CLAUDIA
Address: 4026 BAYSHORE BLVD NE
City-St-Zip: ST. PETERSBURG, FL 33703

Title: VP () Delete
Name: SAN MIGUEL, GLORIA
Address: 3026 CONIFER DR.
City-St-Zip: LARGO, FL 33771

Title: T (X) Delete
Name: CRUZ, H. TONI CPA
Address: LAKEPOINTE II 3111 W. DR. M. L. KING BLVD.
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPT (X) Change () Addition
Name: MARTINEZ TYSON, DINORAH
Address: 19278 WOOD SAGE DRIVE
City-St-Zip: TAMPA, FL 33647

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: DINORAH MARTINEZ TYSON

VPY

01/16/2009

Electronic Signature of Signing Officer or Director

Date