

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001717

FILED  
Apr 24, 2008  
Secretary of State

**Entity Name:** LOGIA MARIANA GRAJALES 167 CORP

**Current Principal Place of Business:**

600 W 29 ST  
HIALEAH, FL 33012

**New Principal Place of Business:**

**Current Mailing Address:**

600 W 29 ST  
HIALEAH, FL 33012

**New Mailing Address:**

**FEI Number:** 59-2424591

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARTIN, TERESA  
8228 SW 36 ST  
MIAMI, FL 33155 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: MARTIN, TERESA  
Address: 8228 SW 36 ST  
City-St-Zip: MIAMI, FL 33155

Title: D ( ) Delete  
Name: MUNOZ, MARIA  
Address: 695 E 8 CT  
City-St-Zip: HIALEAH, FL 33010

Title: D ( ) Delete  
Name: ROBLES, ELISA  
Address: 4111 W 8 AVE  
City-St-Zip: HIALEAH, FL 33012

**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:

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: ELISA ROBLES

D

04/24/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date