03-29-2006 90139 023 ****61.00
N05000002945

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
06 JUL 13 AM 10:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N05000002945

1. Entity Name
FRATERNIDAD BOAQUENA DE MIAMI (FMB), INC.

Principal Place of Business	Mailing Address
17408 SW 140 CT MIAMI, FL 33177	17408 SW 140 CT MIAMI, FL 33177

04242006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 20-2767047 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
INCER, JOSE A 17408 SW 140 CT MIAMI, FL 33177	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ESPINOSA, SERGIO F 17408 SW 140 CT MIAMI, FL 33177	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ESPINOSA SERGIO F 17408 SW 140 CT MIAMI, FL 33177	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD OBANDO, DIEGO RAMON 17408 SW 140 CT MIAMI, FL 33177	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S INCER, JOSE A 17408 SW 140 CT MIAMI, FL 33177	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD INCER JOSE A 17408 SW 140 CT MIAMI FL 33177	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GARCIA, JOSE S 17408 SW 140 CT MIAMI, FL 33177	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SEQUEIRA PERLA 17408 SW 140 CT MIAMI FL 33177	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S SEQUEIRA, LAZARO MOISES 17408 SW 140 CT MIAMI, FL 33177	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S JARQUIN, DIX 17408 SW 140 CT MIAMI, FL 33177	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 04/24/06 (305) 525-9749
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #