2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2009
Secretary of State

DOCUMENT# N05000004181

Entity Name: HOME OF REFUGE INTERNATIONAL, INC.

Current Principal Place of Business:

6560 NW 114TH AVE
UNIT 522
DORAL, FL 33178

New Principal Place of Business:

Current Mailing Address:

6560 NW 114TH AVE
UNIT 522
DORAL, FL 33178

New Mailing Address:

FEI Number: 20-2654314 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RIVERA, ANTONIO
6560 NW 114TH AVE
UNIT 522
DORAL, FL 33178 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: RIVERA, ANTONIO
Address: 6560 NW 114TH AVE UNIT 522
City-St-Zip: DORAL, FL 33178

Title: D ( ) Delete
Name: PERERA, MIGUEL A
Address: 428 W. CRESCENT DR.
City-St-Zip: CLEWISTON, FL 33440

Title: D ( ) Delete
Name: CERDA, BALTAZAR
Address: TWIN LAKE TRAILER PARK LOT 72
City-St-Zip: CLEWISTON, FL 33440

Title: D ( ) Delete
Name: JUNIOR, RAMIREZ
Address: 18360 MEDITERRANEAN BLVD. # 2604
City-St-Zip: HIALEAH, FL 33015

Title: D ( ) Delete
Name: JONANTHAN, OLIVARDIA
Address: 18360 MEDITERRANEAN BLVD. #1805
City-St-Zip: MIAMI LAKES, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: PERERA, MIGUEL A
Address: 413 W. CRESCENT DR.
City-St-Zip: CLEWISTON, FL 33440

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: ANTONIO RIVERA D 01/29/2009

Electronic Signature of Signing Officer or Director — Date