

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005398

FILED
Jan 04, 2008
Secretary of State

Entity Name: MANA BENEVOLENT OUTREACH INC

Current Principal Place of Business:

3621 NE 13TH AVE
POMPANO BEACH, FL 33064

New Principal Place of Business:

Current Mailing Address:

3621 NE 13TH AVE
POMPANO BEACH, FL 33064

New Mailing Address:

FEI Number: 20-2896666

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIMA, RUBEN
3621 NE 13TH AVE.
POMPANO BEACH, FL 33064 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: LIMA, RUBEN
Address: 3621 NE 13TH AVE
City-St-Zip: POMPANO BEACH, FL 33064

Title: D () Delete
Name: LIMA, MARIA A
Address: 3621 NE 13TH AVE
City-St-Zip: POMPANO BEACH, FL 33064

Title: D () Delete
Name: PALADINO, MARIA R
Address: 16581 BLATT BLVD #202
City-St-Zip: WESTON, FL 33326

Title: D () Delete
Name: UNGARO, ANGELA V
Address: 300 NE 44TH ST.
City-St-Zip: POMPANO BEACH, FL 33064

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:

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: RUBEN LIMA

DR

01/04/2008

Electronic Signature of Signing Officer or Director

Date