

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005886

Entity Name: EL ALMA HISPANA INC.

FILED
Jan 27, 2007
Secretary of State

Current Principal Place of Business:

617 SEA PINE WAY
C1
GREENACRES, FL 33415

New Principal Place of Business:

Current Mailing Address:

617 SEA PINE WAY
C1
GREENACRES, FL 33415

New Mailing Address:

FEI Number: 20-2958665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLEGO, M. ALMA
617 SEA PINE WAY
C1
GREENACRES, FL 33415 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,P () Delete
Name: GALLEGO, M. ALMA
Address: 617 SEA PINE WAY APT. C1
City-St-Zip: GREENACRES, FL 33415

Title: DVP () Delete
Name: GIRALDO, MARIO
Address: 1224 N. M. STREET
City-St-Zip: LAKE WORTH, FL 33460

Title: D,T () Delete
Name: GABRIELLI, MARIA A
Address: 1733 KUDZA RD
City-St-Zip: WEST PALM BEACH, FL 33415

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,P (X) Change () Addition
Name: GALLEGO, M. ALMA
Address: 617 SEA PINE WAY APT. C1
City-St-Zip: GREENACRES, FL 33415

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

Title: D,T (X) Change () Addition
Name: VASQUEZ, ISABEL
Address: 4670 PORTOFINO WAY APT 19-02
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D,S () Change (X) Addition
Name: PORTILLO, NAYADE
Address: 4670 PORTOFINO WAY APT 19-02
City-St-Zip: WEST PALM BEACH, FL 33409

I hereby certify that the information supplied with this filing does not qualify for the 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: M. ALMA GALLEGO

P

01/27/2007

Electronic Signature of Signing Officer or Director

Date