2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007964

Entity Name: LATINO CHILDREN FUND, INC.

FILED Mar 04, 2009 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

18604 NE 18TH AVE # 251

MIAMI, FL 33179

Current Mailing Address: New Mailing Address:

18604 NE 18TH AVE # 251 MIAMI, FL 33179

FEI Number: 20-3139854 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

GARCIA, DOUGLAS R 18604 NE 18TH AVE # 251 MIAMI, FL 33179 US

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:

Flackway is Competing of Devictors of Appet

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 CEO () Delete
 Title:
 P (X) Change () Addition

 Name:
 GARCIA, DOUGLAS
 Name:
 GARCIA, DOUGLAS R

 Address:
 18604 NE 18TH AVE #251
 Address:
 18604 NE 18TH AVE #251

City-St-Zip: MIAMI, FL 33179 City-St-Zip: MIAMI, FL 33179

Title: CFO () Delete Title: T (X) Change () Addition Name: MORENO, ROBERTO Name: OSBORN, MARYANN

Address: 20708 BISCAYNE BLVD Address: 1050 93 ST #5F

City-St-Zip: AVENTURA, FL 33180 City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: COO () Delete Title: S (X) Change () Addition

 Name:
 WEST, ERROL
 Name:
 GUALIERI, PRECIOUS

 Address:
 102 NE 2ND STREET SUITE 245
 Address:
 360 NE 152 ST

 City-St-Zip:
 BOCA RATON, FL 33432
 City-St-Zip:
 MIAMI, FL 33162

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: DOUGLAS R. GARCIA P 03/04/2009