## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000008308

Entity Name: TU HISPANO S.O.S. CORP

FILED Aug 10, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

 11865 SW 26 ST
 11865 SW 26 ST

 BLD I STE 15-16
 BLD I STE 1-17

 MIAMI, FL 33175
 MIAMI, FL 33175

Current Mailing Address: New Mailing Address:

 11865 SW 26 ST
 11865 SW 26 ST

 BLD I STE 15-16
 BLD I STE 1-17

 MIAMI, FL 33175
 MIAMI, FL 33175

FEI Number: 20-3267237 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

 DURAN, ONELIA M
 DURAN, ONELIA M

 11865 SW 26 ST
 11865 SW 26 ST

 BLD I STE 15-16
 BLD I STE 1-17

 MIAMI, FL 33175 US
 MIAMI, FL 33175 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: ONELIA DURAN 08/10/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PDT ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 DURAN, ONELIA M
 Name:
 DURAN, ONELIA M

 Address:
 11865 SW 26 ST BLDG I # 15-16
 Address:
 11865 SW 26 ST BLDG I # 1-17

City-St-Zip: MIAMI, FL 33175 US City-St-Zip: MIAMI, FL 33175 US

Title: VPD ( ) Delete Title: VPT (X) Change ( ) Addition Name: DYER, ELENA Name: DYER, ELENA

 Address:
 11865 SW 26 ST BLDG I STE #15-16
 Address:
 8905 SW 214 STREET

 City-St-Zip:
 MIAMI, FL 33175 US
 City-St-Zip:
 MIAMI, FL 33189 US

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

 Name:
 BARRIOS, YÜRELIS
 Name:
 GLENNY, ELENA

 Address:
 11865 SW 26 ST BLDG I STE 15-16
 Address:
 1411 SW 102 AVE

 City-St-Zip:
 MIAMI, FL 33175
 City-St-Zip:
 MIAMI, FL 33174

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: ONELIA DURAN PD 08/10/2009