

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011222

FILED
Jul 06, 2009
Secretary of State

Entity Name: TE EXALTAMOS, CORP.

Current Principal Place of Business:

214 E HALLANDALE BEACH BLVD
HALLANDALE, FL 33009 55

New Principal Place of Business:

401 NW 98 AVE
PEMBROKE PINES, FL 33024

Current Mailing Address:

214 E HALLANDALE BEACH BLVD
HALLANDALE, FL 33009 55

New Mailing Address:

401 NW 98 AVE
PEMBROKE PINES, FL 33024

FEI Number: 20-4062063 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

DIAZ, ADA SOPHIA
18011 BISCAYNE BLVD
APT #1005
AVENTURA, FL 33160 US

Name and Address of New Registered Agent:

DIAZ, ADA SOPHIA
401 NW 98 AVE
PEMBROKE, FL 33024 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: MIGUEL DIAZ

07/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DIAZ, MIGUEL A
Address: 18011 BISCAYNE BLVD
City-St-Zip: AVENTURA, FL 33160

Title: S () Delete
Name: UZCATEGUI, AMY
Address: 16919 NORTH BAY RD AP # 203
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: T () Delete
Name: DIAZ, ADA SOPHIA
Address: 18011 BISCAYNE BLVD APT # 1005
City-St-Zip: AVENTURA, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DIAZ, MIGUEL A
Address: 401 NW 98 AVE
City-St-Zip: PEMBROKE PINES, FL 33024

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: MIGUEL DIAZ

P

07/06/2009

Electronic Signature of Signing Officer or Director

Date