

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004630

FILED  
Mar 26, 2009  
Secretary of State

Entity Name: LIGHT & LIFE PUBLISHERS, CORP.

**Current Principal Place of Business:**

13329 SOUTHWEST 135TH AVENUE  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

13329 SOUTHWEST 135TH AVENUE  
MIAMI, FL 33186

**New Mailing Address:**

FEI Number: 22-3930382

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

NILSON, THOBER  
13329 SOUTHWEST 135TH AVENUE  
MIAMI, FL 33186 US

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

THOBER, NILSON  
13329 SOUTHWEST 135TH AVENUE  
MIAMI, FL 33186 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: NILSON THOBER

03/26/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BREPOHL, JOSUE  
Address: 13329 SOUTHWEST 135TH AVENUE  
City-St-Zip: MIAMI, FL 33186

Title: SD ( ) Delete  
Name: GONCALVES, LUIZ S  
Address: 13329 SOUTHWEST 135TH AVENUE  
City-St-Zip: MIAMI, FL 33186

Title: TD ( ) Delete  
Name: ZAHORCAK, NATANOEL  
Address: 13329 SOUTHWEST 135TH AVENUE  
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete  
Name: THOBER, NILSON  
Address: 13329 SOUTHWEST 135TH AVENUE  
City-St-Zip: MIAMI, FL 33186

Title: VP ( ) Delete  
Name: KLOC, CHARLES J  
Address: 13329 SOUTHWEST 135TH AVENUE  
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete  
Name: MORAES, ELI C  
Address: 13329 SOUTHWEST 135TH AVENUE  
City-St-Zip: MIAMI, FL 33186

**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:

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: NILSON THOBER

D

03/26/2009

Electronic Signature of Signing Officer or Director

Date