

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007702

FILED
Apr 26, 2007
Secretary of State

Entity Name: FACILITIES FOR LOW INCOME HOUSES, INC.

Current Principal Place of Business:

18701 SW 82ND AVENUE
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

18701 SW 82ND AVENUE
MIAMI, FL 33156

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESTRE, RAMON
18701 SW 82ND AVENUE
MIAMI, FL 33156 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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Change (X) Addition
Name: MESTRE, RAMON
Address: 18701 SW 82 AVENUE
City-St-Zip: MIAMI, FL 33157

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: RAMON MESTRE

D

04/26/2007

Electronic Signature of Signing Officer or Director

Date