

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 11, 2008  
Secretary of State**

DOCUMENT# N06000009300

Entity Name: LOGIA ANTONIO DE LA PIEDRA INC.

**Current Principal Place of Business:**

1883 SW 1ST ST  
MIAMI, FL 33135

**New Principal Place of Business:**

**Current Mailing Address:**

1883 SW 1ST ST  
MIAMI, FL 33135

**New Mailing Address:**

FEI Number: 20-5488408      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GOVEA, ANTONIO  
1883 SW 1ST ST  
MIAMI, FL 33135    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: PD ( ) Delete  
Name: GOVEA, ANTONIO  
Address: 13823 SW 152 TERR  
City-St-Zip: MIAMI, FL 33177

Title: TD ( ) Delete  
Name: GUERRA, ELIODORO  
Address: 2901 SW 19 TERR  
City-St-Zip: MIAMI, FL 33145

Title: SD ( ) Delete  
Name: ALVAREZ, ALBERTO  
Address: 211 NW 109 AVE #501  
City-St-Zip: MIAMI, FL 33172

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: CRISOSTOMO, LEO F  
Address: 9000 W. FLAGLER ST. #13  
City-St-Zip: MIAMI, FL 33174 23

Title: ST (X) Change ( ) Addition  
Name: SAN ROMAN, MANUEL  
Address: 4311 SW 97 PL.  
City-St-Zip: MIAMI, FL 33165

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: LEO FRANK CRISOSTOMO

SD

02/11/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date