2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N06000009688

1. Entity Name

CIRCULO DE ESCRITORES Y POETAS IBEROAMERICANOS, INC..



FILED Feb 27, 2008 08:00 AM Secretary of State

Principal Place of Business

PO BOX 441806 MIAMI, FL 33144 Mailing Address

8236 WEST FLAGLER STREET MIAMI, FL 33144



DO NOT WRITE IN THIS SPACE

02042008 No Chg-NP CF

CR2E037 (4/06)

4. FEI Number 51-0603764

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LACAYO, CESAR 8236 WEST FLAGLER STREET MIAMI, FL 33144

DO NOT WRITE IN THIS SPACE

				A PR	· dr. dr.
	named entity submits this statement for the purpions of registered agent.	oose of changing its registere	d office or registered agent, or bo	oth, in the State of Florida. I an	familiar with, and accept
SIGNATURE.					<u> </u>
	Signature, typed or printed name of registered agent and title if ap	plicable. (NOTE: Registered	Agent signature required when reinstating)	DATE	: <u> </u>
	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Finan Trust Fund Contribution.	sing \$5.00 May Be Added to Fees		. ;
10.	0. OFFICERS AND DIRECTORS		and the second second	The state of the state of the state of	研究的
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LACAYO, CESAR 13270 SW 58 TERRACE, #7 MIAMI, FL 33193		The state of the s	10000004179	
TITLE NAME STREET ADDRESS City-ST-Zip	T MARTINEZ, MARIADILLA 12259 SW 17 LANE #104 MIAMI, FL 33175		May a	03/11/08-80001	-022 70.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MACIAS, EDGARD 3081 NW 6 ST MIAMI, FL 33125		DO	NOT WRIT	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	· .		IN	THIS SPAC	E
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,			Table of the Control
TITLE NAME STREET ADDRESS					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental eport is true and accorate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Date

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