

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012528

FILED
Sep 18, 2008
Secretary of State

Entity Name: INTERNATIONAL FRATERNITY OF THE VIRGIN MARY UNTIER OF KNOTS, INC.

Current Principal Place of Business:

6701 SUNSET DRIVE
SUITE # 104
SOUTH MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 430230
SOUTH MIAMI, FL 33243-023

New Mailing Address:

FEI Number: 06-1802837 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

Name and Address of New Registered Agent:

GONZALEZ, CARIDAD T
6701 SUNSET DRIVE
#104
SOUTH MIAMI, FL 33143 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: IBERTIS RIVERA, MARIO H
Address: PO BOX 430230
City-St-Zip: SOUTH MIAMI, FL 33243-023

Title: VP/D () Delete
Name: GONZALEZ, CARIDAD T
Address: PO BOX 430230
City-St-Zip: SOUTH MIAMI, FL 33243-023

Title: S/D () Delete
Name: ENRIQUEZ, DINORAH T
Address: PO BOX 430230
City-St-Zip: SOUTH MIAMI, FL 33243-023

Title: T/D () Delete
Name: ZUNILDA ARIAS, LIDEA
Address: PO BOX 430230
City-St-Zip: SOUTH MIAMI, FL 33243-023

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:

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: CARIDAD T. GONZALEZ

VP/D

09/18/2008

Electronic Signature of Signing Officer or Director

Date