

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012854

FILED
Apr 30, 2009
Secretary of State

Entity Name: SOLIDARITY M-DAMACO, INC

Current Principal Place of Business:

5073 E TAMIAMI TRAIL
NAPLES, FL 34113

New Principal Place of Business:

Current Mailing Address:

5073 E TAMIAMI TRAIL
NAPLES, FL 34113

New Mailing Address:

FEI Number: 20-8093025

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAJUSTE, OSNEL
5073 E TAMIAMI TRAIL
NAPLES, FL 34113 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: D () Delete
Name: CAJUSTE, OSNEL
Address: 5073 E TAMIAMI TRAIL
City-St-Zip: NAPLES, FL 34113

Title: D () Delete
Name: CHERISOL, REMY
Address: PO BOX 232
City-St-Zip: PALM CITY, FL 34113 US

Title: D () Delete
Name: DUVERNA, JOSUE
Address: 1440 CORAL RIDGE DR 199
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D () Delete
Name: CHERISOL, VILER
Address: PO BOX 232
City-St-Zip: PALM CITY, FL 34990

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: OSNEL CAJUSTE

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date