

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012895

FILED
Apr 09, 2009
Secretary of State

Entity Name: LANTERNS ORGANIZATION, INC.

Current Principal Place of Business:

20777 SW 129 COURT
MIAMI, FL 33177

New Principal Place of Business:

Current Mailing Address:

20777 SW 129 COURT
MIAMI, FL 33177

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAW OFFICES OF BRANDY GONZALEZ-ABREU, P.A.
9830 SW 77 AVE
STE. 130
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: D () Delete
Name: LESTER, NIKKA
Address: 20777 SW 129 COURT
City-St-Zip: MIAMI, FL 33177

Title: D () Delete
Name: GONZALEZ-ABREU, BRANDY
Address: 9830 SW 77 AVE, STE. 130
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: MORALES, GERMAN
Address: 9830 SW 77 AVE, STE. 130
City-St-Zip: MIAMI, FL 33156

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:

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: NIKKA LESTER

D

04/09/2009

Electronic Signature of Signing Officer or Director

Date