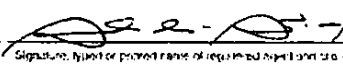
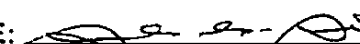


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 25, 2008 8:00 am
Secretary of State

02-25-2008 90056 001 ****70.00

DOCUMENT # N07000000613					
1. Entity Name THE SUPREME COUNCIL OF THE 33 DEGREE, SPANISH LANGUAGE FOR THE SOUTHERN JURISDICTION OF THE					
Principal Place of Business 910 NW 22 AVE. MIAMI FL 33125			Mailing Address 910 NW 22 AVE. MIAMI FL 33125		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 26-2199815	
				5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PEREZ, JOHN W. 10745 SW 32 ST. MIAMI FL 33165			7. Name and Address of New Registered Agent Name ARMANDO SALAS-AMARO Street Address (P.O. Box Number is Not Acceptable) 910 N.W. 22 AVE City MIAMI FL 33125		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  ARMANDO SALAS-AMARO DATE 02-14-08					
FILE NOW: FEE IS \$61.25 Due By May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make Check Payable to: Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D	☒ Delete	TITLE	PD	☐ Change ☒ Addition
NAME	PEREZ, SILVESTRE L.		NAME	GABRIEL VIEIRA	
STREET ADDRESS	1919 NW 15 ST.		STREET ADDRESS	910 N.W. 22 AVE	
CITY - ST - ZIP	MIAMI FL 33125		CITY - ST - ZIP	MIAMI - FL 33125	
TITLE	D	☒ Delete	TITLE	SD	☐ Change ☒ Addition
NAME	CORDERO, TRANQUILINO		NAME	FRANK COBO TERANZO	
STREET ADDRESS	910 NW 22 AVE.		STREET ADDRESS	910 N.W. 22 AVE	
CITY - ST - ZIP	MIAMI FL 33125		CITY - ST - ZIP	MIAMI - FL 33125	
TITLE		☐ Delete	TITLE	TD	☐ Change ☒ Addition
NAME			NAME	MANUEL PLASENCIA	
STREET ADDRESS			STREET ADDRESS	910 N.W. 22 AVE.	
CITY - ST - ZIP			CITY - ST - ZIP	MIAMI - FL 33125	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate 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:  ARMANDO SALAS-AMARO DATE 02-14-08 COPY NO. 305-565-5766					