

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001023

FILED  
Jan 11, 2009  
Secretary of State

**Entity Name:** MIRADITA DE ESPERANZA INC.

**Current Principal Place of Business:**

9119 KEATING DR  
PALM BCH GARDEN, FL 33410

**New Principal Place of Business:**

**Current Mailing Address:**

200 PERIWINKLE WAY  
APT 131  
SANIBEL, FL 33957

**New Mailing Address:**

**FEI Number:** 20-8435526

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RUIZ, JOSEFINA  
9119 KEATING DR  
PALM BCH GARDEN, FL 33410 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: PSD ( ) Delete  
Name: RUIZ, JOSEFINA  
Address: 9119 KEATING DR  
City-St-Zip: PALM BCH GARDEN, FL 33410

Title: VPTD ( ) Delete  
Name: RUIZ, PORFIRIO  
Address: 9119 KEATING DR  
City-St-Zip: PALM BCH GARDEN, FL 33410

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: JOSEFINA RUIZ

PRES

01/11/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date