

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001299

FILED
Apr 16, 2009
Secretary of State

Entity Name: MI CASA DE ADORACION INC.

Current Principal Place of Business:

9831 NW 58TH STREET
151
DORAL, FL 33178

New Principal Place of Business:

Current Mailing Address:

9831 NW 58TH STREET
151
DORAL, FL 33178

New Mailing Address:

FEI Number: 20-8392846 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PALMA, RAUL J
9831 NW 58TH STREET
151
DORAL, FL 33178 US

Name and Address of New Registered Agent:

PALMA, RAUL J REV
9831 NW 58TH STREET
151
DORAL, FL 33178 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: RAUL JOSELITO PALMA SOLER

04/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PALMA, RAUL J REV
Address: 9831 NW 58TH STREET #151
City-St-Zip: DORAL, FL 33178 US

Title: VP () Delete
Name: CONTRERAS, KARLA
Address: 9831 NW 58TH STREET #151
City-St-Zip: DORAL, FL 33178

Title: T () Delete
Name: CUAREZMA, NOEL
Address: 9831 NW 58TH STREET #151
City-St-Zip: DORAL, FL 33178

Title: S (X) Delete
Name: ESCOBAR, DOUGLAS
Address: 9831 NW 58TH STREET #151
City-St-Zip: DORAL, FL 33178

Title: TR (X) Delete
Name: SARCENO, CESAR
Address: 9831 NW 58TH STREET #151
City-St-Zip: DORAL, FL 33178

Title: TR (X) Delete
Name: DAVILA, EDDY
Address: 9831 NW 58TH STREET #151
City-St-Zip: DORAL, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: CONTRERAS, KARLA P REV
Address: 9831 NW 58TH STREET #151
City-St-Zip: DORAL, FL 33178 US

Title: T (X) Change () Addition
Name: CESAR, SARCENO
Address: 9831 NW 58TH STREET #151
City-St-Zip: DORAL, FL 33178 US

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: RAUL JOSELITO PALMA, NOEL, EDDY, CESAR, D

ALL

04/16/2009

Electronic Signature of Signing Officer or Director

Date