

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001396

FILED
Mar 05, 2009
Secretary of State

Entity Name: LIFE BRIDGES ORG, INC.

Current Principal Place of Business:

477 NW 27TH AVE.
MIAMI, FL 33125

New Principal Place of Business:

Current Mailing Address:

477 NW 27TH AVE.
MIAMI, FL 33125

New Mailing Address:

FEI Number: 20-8312486

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTERO, AMARILYS G
13064 SW 54TH CT.
MIRAMAR, FL 33027 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: ROMERO, FRANK
Address: 2432 SW 128TH AVE.
City-St-Zip: MIAMI, FL 33175

Title: D () Delete
Name: MONTERO, AMARILYS G
Address: 13064 SW 54TH CT.
City-St-Zip: MIRAMAR, FL 33027

Title: D () Delete
Name: ALVAREZ, ROGER
Address: 5503 NW 184TH TERR.
City-St-Zip: MIAMI GARDENS, FL 33055

Title: D () Delete
Name: FERNANDEZ, NELSON A
Address: 5202 BRYANT IRVIN RD., #3101
City-St-Zip: FT. WORTH, FL 67132

Title: D () Delete
Name: RIVERO, JUAN
Address: 2439 HAYBROOK LANE
City-St-Zip: CHARLOTTE, NC 28262

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: AMARILYS MONTERO

D

03/05/2009

Electronic Signature of Signing Officer or Director

Date