

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004196

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: CAMINHO DA GRACA ESTACAO FLORIDA, INC.

**Current Principal Place of Business:**

3950 COCONUT CREEK PARKWAY  
COCONUT CREEK, FL 33066

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 4416  
DEERFIELD BEACH, FL 33442

**New Mailing Address:**

6424 HUDSON BAY LANE  
LAKE WORTH, FL 33467

FEI Number: 20-8921221

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TAX HOUSE CORPORATION  
1100 S FEDERAL HWY  
2ND FLOOR  
DEERFIELD BEACH, FL 33441 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: P ( ) Delete  
Name: PORTUGAL, VOLMER JR.  
Address: 3510 BANKS RD., #202  
City-St-Zip: MARGATE, FL 33063

Title: V ( ) Delete  
Name: ARAGAO, HEBER S.  
Address: 641 LYONS RD., #11-105  
City-St-Zip: COCONUT CREEK, FL 33063

Title: D ( ) Delete  
Name: SAMPAIO, CARLOS A.  
Address: 2910 SW 12 ST.  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: D ( ) Delete  
Name: FARIAS, EZEQUIEL  
Address: 3510 BANKS RD., #102.  
City-St-Zip: MARGATE, FL 33063

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

Title: P (X) Change ( ) Addition  
Name: ARAGAO, HEBER S  
Address: 641 LYONS # 11 APT. 105  
City-St-Zip: COCONUT CREEK, FL 33063

Title: V (X) Change ( ) Addition  
Name: ANDRADE, ELIMAR S  
Address: 22338 BENIDORM DRIVE  
City-St-Zip: BOCA RATON, FL 33428

Title: D (X) Change ( ) Addition  
Name: SAMPAIO, CARLOS A.  
Address: 1873 WILDWOOD LANE N  
City-St-Zip: DEERFIELD BEACH, FL 33442

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: HEBER S ARAGAO

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date