2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004299

Title:

Name:

Address:

City-St-Zip:

SD

COLON, PRISILLA

1608 N GORDON ST

PLANT CITY, FL 33563

() Delete

FILED Mar 19, 2008 Secretary of State

Entity Nam	IE: LLUVIAS	DE BENDICIONES, INC.		
Current Principal Place of Business:		New Principal Place of Business:		
	TH DAWN MI Y, FL 33566	EADOW COURT		
Current Mailing Address:		New Mailing Address	s:	
	TH DAWN MI Y, FL 33566	EADOW COURT		
FEI Number: 2	26-0259875	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:		
041.0550	CARMELO	TARONAL COLURT		
4708 NORŤ	Y, FL 33566			
4708 NORT PLANT CIT	Y, FL 33566 named entity	US	rpose of changing its registered	d office or registered agent, or both,
4708 NORT PLANT CIT	Y, FL 33566 named entity of Florida. E:	US submits this statement for the pu		d office or registered agent, or both,
4708 NORT PLANT CIT The above r in the State	Y, FL 33566 named entity of Florida. E:	US		d office or registered agent, or both, Date
4708 NORT PLANT CIT The above r in the State SIGNATUR	Y, FL 33566 named entity of Florida. E:	US submits this statement for the pu	t	
4708 NORT PLANT CIT The above r in the State SIGNATUR	Y, FL 33566 named entity of Florida. E: Electro AND DIRECTO SALCEDO, CA	US submits this statement for the pu nic Signature of Registered Agen CTORS:) Delete RMELO DAWN MEADOW COURT	t	Date
4708 NORT PLANT CIT	Y, FL 33566 named entity of Florida. E: Electro AND DIRECTO PD (SALCEDO, CA 4708 NORTH I PLANT CITY, F VPD (SALCEDO, EV	Submits this statement for the punic Signature of Registered Agence CTORS:) Delete RRMELO DAWN MEADOW COURT FL 33566) Delete RELYN DAWN MEADOW COURT	t ADDITIONS/CHANGE Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS:

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: CARMELO SALCEDO PD 03/19/2008

() Change () Addition