## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000004577

FILED Mar 13, 2008 Secretary of State

Entity Name: FUNDACION SOS COLOMBIA ORLANDO INC

Current Principal Place of Business: New Principal Place of Business:

305 RYDER LN

CASSELBERRY, FL 32707 US

Current Mailing Address: New Mailing Address:

P.O. BOX 677206 ORLANDO, FL 32867

FEI Number: 20-8992823 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:

OCHOA, ALVARO OCHOA, ALVARO 1784 WIILA CIR 1784 WIILA CIRCLE

WINTER PARK, FL 32792 US WINTER PARK, FL 32792 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: ALVARO OCHOA 03/13/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: P ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 OCHOA, ALVARO
 Name:

 Address:
 1784 WIILA CIRCLE
 Address:

 City-St-Zip:
 WINTER PARK, FL 32792 US
 City-St-Zip:

Title: SEC ( ) Delete Title: S (X) Change ( ) Addition

Name: MESA, PIEDAD I Name: MESA, PIEDAD I

 Address:
 844 BRISTOL FOREST WAY
 Address:
 844 BRISTOL FOREST WAY

 City-St-Zip:
 ORLANDO, FL 32828 US
 City-St-Zip:
 ORLANDO, FL 32828 US

 $\label{eq:title:Title:$ 

 Name:
 RAMIREZ, GLORA P
 Name:
 RAMIREZ, GLORIA P

 Address:
 10231 VISTA COVE LN
 Address:
 10231 VISTA COVE LANE

 City-St-Zip:
 ORLANDO, FL 32825 US
 City-St-Zip:
 ORLANDO, FL 32825 US

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 FERNANDO MAZO, LUIS
 Name:
 MAZO, LUIS F

 Address:
 9914 DEAN COVE LN
 Address:
 9914 DEAN COVE LANE

 City-St-Zip:
 ORLANDO, FL 32825
 City-St-Zip:
 ORLANDO, FL 32825

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: ALVARO OCHOA P 03/13/2008