

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007021

FILED
Apr 26, 2009
Secretary of State

Entity Name: COMMUNITY HOME RESCUE ASSISTANCE INC.

Current Principal Place of Business:

18520 NW 67TH AVE
SUITE 166
MIAMI, FL 33015

New Principal Place of Business:

Current Mailing Address:

18520 NW 67TH AVE
SUITE 166
MIAMI, FL 33015

New Mailing Address:

FEI Number: 26-0567136

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALLADARES, EDUARDO I
1208 N STATE RD 7
HOLLYWOOD, FL 33021 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: DP () Delete
Name: DIAZ, JOSEPH R PA
Address: 6889 NW 179TH ST APT. 101
City-St-Zip: HIALEAH, FL 33015

Title: TD () Delete
Name: VALLADARES, EDUARDO I
Address: 1208 N STATE RD 7
City-St-Zip: HOLLYWOOD, FL 33021

Title: VD () Delete
Name: REINOSO, JOSE
Address: 16385 SW 48TH TERR
City-St-Zip: MIAMI, FL 33185

Title: SD () Delete
Name: GALINDO, DENYS
Address: 2229 SW 5TH PLACE
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: VD () Delete
Name: WILLIAMS, ALEX
Address: 2925 CRESTWOOD TERRACE
City-St-Zip: MARGATE, FL 33063

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:

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: JOSEPH R DIAZ

PRES

04/26/2009

Electronic Signature of Signing Officer or Director

Date