

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007416

FILED
Apr 30, 2008
Secretary of State

Entity Name: ALDEA DEL NINO INC.

Current Principal Place of Business:

11400 W FLAGLER ST
SUITE 203
MIAMI, FL 33174 US

New Principal Place of Business:

Current Mailing Address:

767 NW 122ND PLACE
MIAMI, FL 33182 US

New Mailing Address:

FEI Number: 33-1178075

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NUNEZ, CARLOS A
767 NW 122ND PLACE
MIAMI, FL 33182 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: NUNEZ, CARLOS A
Address: 767 NW 122ND PLACE
City-St-Zip: MIAMI, FL 33182 US

Title: VP () Delete
Name: PAREDES, ANA P
Address: 7208 FAIRWAY DRIVE # I-19
City-St-Zip: MIAMI LAKES, FL 33014

Title: TS () Delete
Name: RIVERA, REYNA A
Address: 2098 SE 19TH STREET
City-St-Zip: HOMESTEAD, FL 33035

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:

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: CARLOS A. NUNEZ

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date