2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008945

City-St-Zip:

FILED May 16, 2008 Secretary of State

DOCON	/ILINI# 110/000000343	Secretary or State
Entity Na	me: VISION Y ACCION MISSION, INC.	
Current P	rincipal Place of Business:	New Principal Place of Business:
188 FIRST NAPLES,	「LAKES CIR., #5 FL 34104	
Current M	lailing Address:	New Mailing Address:
188 FIRST NAPLES,	「LAKES CIR., #5 FL 34104	
	: 27-1771294 FEI Number Applied For () nce with s. 607.193(2)(b), F.S., the corporation dic	FEI Number Not Applicable () Certificate of Status Desired () not receive the prior notice.
Name and	d Address of Current Registered Agent:	Name and Address of New Registered Agent:
BEDOYA,		SPL INCOME TAX CORP
188 FIRST LAKES CIR., #5 NAPLES, FL 34104 US		6006 RADIO RD NAPLES, FL 34104 US
in the Stat	e named entity submits this statement for th e of Florida. RE: FERNANDO ODE	e purpose of changing its registered office or registered agent, or both, 05/16/2008
	Electronic Signature of Registered	Agent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	PVST () Delete BODOYA, JOSE 188 FIRST LAKES CIR., #5 NAPLES, FL 34104	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	() Delete	Title: T () Change (X) Addition Name: ARANGO, ANGELA V Address: 188 FURSE LAKES CIR APT 5 City-St-Zip: NAPLES, FL 34104
Title: Name: Address: City-St-Zip:	() Delete	Title: V () Change (X) Addition Name: SANDOVAL-RAMIREZ, MANUEL A Address: 15995 ARBOUR VIEW BLVD APT 532 City-St-Zip: NAPLES, FL 34110
Title: Name: Address:	() Delete	Title: V () Change (X) Addition Name: GUZMAN, EDUARDO Address: 7715 TARA CIR APT 108

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.

City-St-Zip: NAPLES, FL 34104

SIGNATURE: JOSE M BEDOYA PVST 05/16/2008