

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009219

FILED  
Mar 20, 2008  
Secretary of State

Entity Name: ASOCIACION ARARA OBALUAYE INC.

**Current Principal Place of Business:**

16143 SW 72 TERRACE  
MIAMI, FL 33193

**New Principal Place of Business:**

**Current Mailing Address:**

16143 SW 72 TERRACE  
MIAMI, FL 33193

**New Mailing Address:**

FEI Number: 02-0814195

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PORTELA, RAFAEL S  
16143 SW 72 TERRACE  
MIAMI, FL 33193 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: D ( ) Delete  
Name: PORTELA, RAFAEL S  
Address: 16143 SW 72 TERRACE  
City-St-Zip: MIAMI, FL 33193

Title: D ( ) Delete  
Name: VILLA, EUGENIO  
Address: 3410 SW 91 AVE  
City-St-Zip: MIAMI, FL 33165

Title: D ( ) Delete  
Name: MARTINEZ, LAZARO  
Address: 1080 WEST 46 STREET  
City-St-Zip: HIALEAH, FL 33012

Title: D ( ) Delete  
Name: RODRIGUEZ, ALEXANDER  
Address: 2747 SW 19 STREET  
City-St-Zip: MIAMI, FL 33145

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: VILLAR, EUGENIO  
Address: 3410 SW 91 AVE  
City-St-Zip: MIAMI, FL 33165

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: RAFAEL S. PORTELA

PRES

03/20/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date