

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000001810

**FILED**  
**Jan 23, 2012**  
**Secretary of State**

**Entity Name:** LOGIA HIJAS DE ACACIA ANGELA RIPOL AFILIAR 1, CORP

**Current Principal Place of Business:**

600 W 29 ST  
HIALEAH, FL 33012

**New Principal Place of Business:**

**Current Mailing Address:**

600 W 29 ST  
HIALEAH, FL 33012

**New Mailing Address:**

**FEI Number:** 26-2031814

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CABRERA, CARIDAD  
16850 NW 69 PL  
HIALEAH, FL 33015 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  
Name: TERESA, MARTIN  
Address: 8228 SW 36 ST  
City-St-Zip: MIAMI, FL 33155

Title: S  
Name: COMPTIS, ANA GLORIA  
Address: 135 W 14 ST  
City-St-Zip: HIALEAH, FL 33010

Title: T  
Name: CABRERA, CARIDAD  
Address: 16850 NW 69 PL  
City-St-Zip: HIALEAH, FL 33015

I hereby 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 all other like empowered.

SIGNATURE: CARIDAD CABRERA

T

01/23/2012

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

\_\_\_\_\_  
Date