2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002630

Entity Name: UNA GOTA DE VIDA, INC

FILED Feb 08, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
22 NW 2ND STREET HALLANDALE BCH, FL 33009	

Current Mailing Address: New Mailing Address:

22 NW 2ND STREET HALLANDALE BCH, FL 33009

FEI Number: 22-3977470 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SPIEGEL & UTRERA, P.A.

1840 SW 22ND ST.

4TH FLOOR

MIAMI, FL 33145 US

GONZALEZ, SANTIAGO

22 NW 2ND STREET

HALLANDALE BEACH, FL 33009 US

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: SANTIAGO GONZALEZ 02/08/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DP () Change () Addition () Delete GONZALEZ, SANTIAGO Name: Name: Address: 22 NW 2ND STREET Address: City-St-Zip: HALLANDALE BCH, FL 33009 City-St-Zip: Title: () Delete Title: (X) Change () Addition DS Name: REYES, ROBERTO Name: GONZALEZ, VIRGINIA Address: 22 NW 2ND STREET Address: 22 NW 2ND STREET City-St-Zip: HALLANDALE BCH, FL 33009 City-St-Zip: HALLANDALE BCH, FL 33009 Title: () Delete Title: () Change () Addition GONZALEZ, SANTOS Name: Name: Address: 22 NW 2ND STREET Address: City-St-Zip: HALLANDALE BCH, FL 33009 City-St-Zip:

Title: DS (X) Delete Title: () Change () Addition

 Name:
 GONZALEZ, VIRGINIA
 Name:

 Address:
 22 NW 2ND STREET
 Address:

 City-St-Zip:
 HALLANDALE BCH, FL 33009
 City-St-Zip:

Title: DAS (X) Delete Title: () Change () Addition

 Name:
 PANTOJA, GIDGETH
 Name:

 Address:
 22 NW 2ND STREET
 Address:

 City-St-Zip:
 HALLANDALE BCH, FL 33009
 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: SANTIAGO GONZALEZ VP 02/08/2009