

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003356

FILED
Sep 02, 2009
Secretary of State

Entity Name: CASA BESU, INC.

Current Principal Place of Business:

9550 SW 73 AVE
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

9550 SW 73 AVE
MIAMI, FL 33156

New Mailing Address:

FEI Number: 45-0595283 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

STEPHEN S. MATHISON, P.A.
5606 PGA BLVD
SUITE 211
PALM BCH GARDENS, FL 33418 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: CUNNINGHAM, LILIANA
Address: 533 GREENWAY DRIVE
City-St-Zip: NORTH PALM BCH, FL 33408

Title: D () Delete
Name: CUNNINGHAM, WILLIAM
Address: 533 GREENWAY DRIVE
City-St-Zip: NORTH PALM BCH, FL 33408

Title: D () Delete
Name: MOTTA, NINA
Address: 1117 COUNTRY CLUB DRIVE
City-St-Zip: NORTH PALM BCH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CUNNINGHAM, WILLIAM
Address: 9550 SW 73RD AVE
City-St-Zip: MIAMI, FL 33156

Title: D (X) Change () Addition
Name: CUNNINGHAM, LILIANA
Address: 9550 SW 73RD AVE
City-St-Zip: MIAMI, FL 33156

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: WILLIAM CUNNINGHAM

D

09/02/2009

Electronic Signature of Signing Officer or Director

Date