2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2011
Secretary of State

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Entity Name: COMMUNITY IMPROVEMENT ORGANIZATION, INC.

Current Principal Place of Business:

10001 NW 87 AVENUE
HIALEAH GARDENS, FL 33016 US

New Principal Place of Business:

Current Mailing Address:

10001 NW 87 AVENUE
HIALEAH GARDENS, FL 33016 US

New Mailing Address:

FEI Number: 80-0217241 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PAGUADA, CARLOS A
10850 NW 82 TERRACE
11
DORAL, FL 33178 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: PD
Name: CYRUS, WEST
Address: 7707 NW 103RD STREET
City-St-Zip: HIALEAH GARDENS, FL 33016 US

Title: VP
Name: PASTOR, LAGO PABLO
Address: 19146 NW 78TH CT
City-St-Zip: HIALEAH, FL 33015 US

Title: SD
Name: ALFONSO, EVELYN
Address: 825 E 35 STREET
City-St-Zip: HIALEAH, FL 33013 US

Title: TD
Name: ROBINSON, SAMUEL
Address: 9915 W OKEECHOBEE RD
City-St-Zip: HIALEAH GARDENS, FL 33016

Title: D
Name: MAYOR, DE LA CRUZ YOISET
Address: 10187 N.W. 130TH
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: D
Name: NUMA, JOSHUA FIU
Address: 3164 CALEDONIA AVEÂ
City-St-Zip: NAPLES, FL 34112

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: IRIS PAGUADA CEO 04/29/2011

Electronic Signature of Signing Officer or Director Date