


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 06, 2006 8:00 am
Secretary of State

03-06-2006 90025 002 ****61.25

DOCUMENT # N08848 1. Entity Name LOS FLORIDANOS SOCIAL CLUB, INC.	
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Principal Place of Business 600 WEST 29TH ST %LOS FLORIDANOS S.C. HIALEAH FL 33012	Mailing Address 9949 NW 27TH TERR C/O ALBERTO M REYES MIAMI FL 33172
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address 901 SW 141 AVE. # 308 Suite, Apt. #, etc. C/O ALBERTO M REYES
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City & State PEMBROKE PINES, FL.	4. FEI Number NO-T APPLICABLE	Applied For Not Applicable
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Zip 33027	Country USA	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent REYES, ALBERTO M 9949 NW 27TH TERR MIAMI FL 33172	7. Name and Address of New Registered Agent Name ALBERTO M REYES Street Address (P.O. Box Number is Not Acceptable) 901 SW 141 AVE. # 308 City PEMBROKE PINES FL Zip Code 33027
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reconstituting) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FULGUEIRA, MARIO 908 SW 139 PLACE MIAMI FL 33184 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ENRIQUE SANTAMARIA 4525 West 20 Ave. #429 C HIALEAH, FL. 33012 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ESTRADA, MANUEL 1241 EST 8TH AVE. HIALEAH FL 33010 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vp BENIGNO BARRERO 660 West 72 PL. HIALEAH, FL. 33014 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LEAL, ENEIDO 58 EST 11TH ST HIALEAH FL 33010 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sd JORGE ALONSO 784 West 56 St. HIALEAH, FL. 33012 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS ALONSO, JORGE 784 WST 56TH ST HIALEAH FL 33012 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vs JOSE DACAL 12950 SW 7 Court PEMBROKE PINES, FL. 33027 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD REYES, ALBERTO 9949 NW 27TH TERR. DORAL FL 33172 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ALBERTO M REYES 901 SW 141 AVE. # 308 PEMBROKE PINES, FL. 33027 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT ALVAREZ, ROBERTO 323 EAST 61 ST. HIALEAH FL 33010 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALBERTO REYES *Alberto Reyes* 2-28-06 954-450-3532