

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000005972

FILED  
Feb 19, 2012  
Secretary of State

**Entity Name:** BUKAS LOOB SA DIYOS - ORLANDO, INC.

**Current Principal Place of Business:**

SAINT CHARLES BORROMEO CATHOLIC CHURCH  
4001 EDGEWATER DR  
EDGEWATER, FL 32804

**New Principal Place of Business:**

**Current Mailing Address:**

556 GENOA DR.  
KISSIMMEE, FL 34759

**New Mailing Address:**

556 GENOA DR.  
KISSIMMEE, FL 34759 US

**FEI Number:** 27-0311496

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAYO, JOSE Z  
556 GENOA DR.  
KISSIMMEE, FL 34759 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: DIR  
Name: ALAYU, PERLITO B  
Address: 15 FLEMING COURT  
City-St-Zip: PALM COAST, FL 32137

Title: DIR  
Name: BERAN, DOMINADOR M JR  
Address: 3263 TIMUCUA CIRCLE  
City-St-Zip: ORLANDO, FL 32857

Title: DIR  
Name: RODRIGUERA, BENJAMIN R  
Address: 662 BARCELONA DRIVE  
City-St-Zip: KISSIMMEE, FL 34759

Title: DIR  
Name: SAYO, JOSE Z  
Address: 556 GENOA DR.  
City-St-Zip: KISSIMMEE, FL 34759

Title: DIR  
Name: SORIANO, RODRIGO A  
Address: 6637 LAKE PEMBROKE PLACE  
City-St-Zip: ORLANDO, FL 32829

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: JOSE Z SAYO

DIR

02/19/2012

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

\_\_\_\_\_  
Date