

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000011517

FILED  
Apr 30, 2011  
Secretary of State

**Entity Name:** FIESTA FOLKLORICA PUERTORRIQUENA DEL ESTADO DE LA FLORIDA, INC.

**Current Principal Place of Business:**

3550 MOONBEAM COURT  
KISSIMMEE, FL 34744

**New Principal Place of Business:**

**Current Mailing Address:**

3550 MOONBEAM COURT  
KISSIMMEE, FL 34744

**New Mailing Address:**

**FEI Number:** 27-1457166

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MERCED, KIM L  
19070 N.W. 57TH AVE.  
STE.308  
MIAMI, FL 33015 US

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

BERMUDEZ, LUZ I  
3550 MOONBEAM CT  
KISSIMMEE, FL 34744 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: LUZ I BERMUDEZ

04/30/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: BERMUDEZ, LUZ  
Address: 3550 MONBEAM COURT  
City-St-Zip: KISSIMMEE, FL 34744

Title: D  
Name: DEJESUS, AWILDA  
Address: 3550 MOONBEAM COURT  
City-St-Zip: KISSIMMEE, FL 34744

Title: D  
Name: IVET, HERNANDEZ  
Address: 6210 BENT PINE DR APT 5-A  
City-St-Zip: ORLANDO, FL 32822

Title: D  
Name: COLLAZO, EFRAIN  
Address: 3550 MOONBEAM COURT  
City-St-Zip: KISSIMMEE, FL 34744

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: LUZ I BERMUDEZ

O/D

04/30/2011

Electronic Signature of Signing Officer or Director

Date