

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000006200

FILED  
Mar 18, 2012  
Secretary of State

**Entity Name:** L.A.M.A. INTERNATIONAL MOTORCYCLE ASSOCIATION INC.

**Current Principal Place of Business:**

522 BLACKSTONE AVE  
DELTONA, FL 32725

**New Principal Place of Business:**

**Current Mailing Address:**

522 BLACKSTONE AVE  
DELTONA, FL 32725

**New Mailing Address:**

**FEI Number:** 45-2705309

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VARGAS, DAVID  
522 BLACKSTONE AVE  
DELTONA, FL 32725 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: P  
Name: NIEVES, MARIO  
Address: 3519 W FULLERTON AVE  
City-St-Zip: CHICAGO, IL 60647

Title: VP  
Name: RAMOS, MIKE  
Address: 3519 W FULLERTON AVE  
City-St-Zip: CHICAGO, IL 60647

Title: T  
Name: PEDRAZA, LEONARDO  
Address: 5132 2ND RD  
City-St-Zip: LAKE WORTH, FL 33467

Title: BM  
Name: VARGAS, DAVID  
Address: 522 BLACKSTONE AVE  
City-St-Zip: DELTONA, FL 32725

Title: S  
Name: URRUTIA, JOHNNY  
Address: 15919 OLDSTONE PLACE  
City-St-Zip: TAMPA, FL 33624

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: DAVID VARGAS

BM

03/18/2012

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

\_\_\_\_\_  
Date