

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000009664

**FILED**  
**Jan 18, 2012**  
**Secretary of State**

**Entity Name:** MOVIMIENTO FEMENINO VASO MAS FRAGIL INC.

**Current Principal Place of Business:**

5808 LYNN RD  
TAMPA, FL 33624

**New Principal Place of Business:**

12814 CEDAR FOREST DR  
6-101  
TAMPA, FL 33625

**Current Mailing Address:**

P.O. BOX 15951  
TAMPA, FL 33684

**New Mailing Address:**

**FEI Number:** 37-1653434

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

TORRES, BARBARA  
5808 LYNN RD  
TAMPA, FL 33624 US

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

TORRES, BARBARA  
12814 CEDAR FOREST DR  
6-101  
TAMPA, FL 33625 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: BARBARA TORRES

01/18/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: TORRES, BARBARA  
Address: 12814 CEDAR FOREST 6-101  
City-St-Zip: TAMPA, FL 33625

Title: E  
Name: DOMINGUEZ, EGLIS  
Address: 2902 WEST SAINT JOHN ST  
City-St-Zip: TAMPA, FL 33607

Title: E  
Name: GARCIA, LUCINDA  
Address: 4204 BIRDSONG BLVD  
City-St-Zip: LUTZ, FL 33559

Title: E  
Name: RIVERA, DIANA  
Address: 7822 MONARCH GARDEN CIR.  
City-St-Zip: APOLLO BEACH, FL 33572

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: BARBARA TORRES

P

01/18/2012

Electronic Signature of Signing Officer or Director

Date