

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 02, 2008  
Secretary of State**

DOCUMENT# N11864

Entity Name: RIOS DE AGUA VIVA DE HIALEAH, INC.

**Current Principal Place of Business:**

1701 WEST 39PL  
HIALEAH, FL 33012 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O LUIS HERNAN SEGOVIA  
8801 S.W. 41 ST.  
MIAMI, FL 33165 US

**New Mailing Address:**

FEI Number: 59-2615537      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

HERNAN, SEGOVIA  
8801 SW 41ST  
MIAMI, FL 33165 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: PTD ( ) Delete  
Name: SEGOVIA, LUIS H  
Address: 8801 SW 41 ST.  
City-St-Zip: MIAMI, FL

Title: SD ( ) Delete  
Name: AVILA, ANGELA  
Address: 1715 W 42 ST #203  
City-St-Zip: HIALEAH, FL 33012

Title: SD ( ) Delete  
Name: SEGOVIA, MARIA R SECRETA  
Address: 8261 NW 8 ST.  
City-St-Zip: MIAMI, FL 33126

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LUIS H. SEGOVIA

PTD

05/02/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date