

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13757

FILED
Feb 10, 2009
Secretary of State

Entity Name: LOGIA "MARTIRES DE LA CABANA" INC.

Current Principal Place of Business:

124 N.W. 15TH AVE
MIAMI, FL 33125 US

New Principal Place of Business:

Current Mailing Address:

124 NW 15 AVE
MIAMI, FL 33125 US

New Mailing Address:

FEI Number: 59-2693891

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PORTUONDO, JORGE
126 NW 15TH AVENUE
MIAMI, FL 33125 US

Name and Address of New Registered Agent:

PORTUONDO, JORGE
124 NW 15TH AVENUE
MIAMI, FL 33125 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:

02/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: PORTUONDO, JORGE
Address: 124 NW 15 AVE #A
City-St-Zip: MIAMI, FL 33125513

Title: TD () Delete
Name: PASTOR, ADALBERTO
Address: 3541 SW 13 TERR
City-St-Zip: MIAMI, FL 33145

Title: PD () Delete
Name: MEDINA, MANUEL
Address: 13700 SW 62ND ST. #108
City-St-Zip: MIAMI, FL 33183

Title: VPD () Delete
Name: CHAVIANO, JULIO R
Address: 1764 NW 19TH ST.
City-St-Zip: MIAMI, FL 33128

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:

Title: VPD (X) Change () Addition
Name: RAMOS, ENRIQUE
Address: 5135 SW 97TH CT
City-St-Zip: MIAMI, FL 33156

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: JORGE PORTUONDO

SD

02/10/2009

Electronic Signature of Signing Officer or Director

Date