

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21206

FILED
Feb 04, 2009
Secretary of State

Entity Name: CLUB PERUANO DE TAMPA, INC.

Current Principal Place of Business:

18907 PEBBLE RUN WAY
TAMPA, FL 33674

New Principal Place of Business:

8711 GETTYSBURG WAY
TAMPA, FL 33635

Current Mailing Address:

P.O. BOX 260006
TAMPA, FL 336850006

New Mailing Address:

P.O. BOX 260006
TAMPA, FL 33685

FEI Number: 59-2850782

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MILLER, MIRTHA E
8711 GETTYSBURG WAY
TAMPA, FL 33635 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: PD () Delete
Name: MILLER, MIRTHA E
Address: 8711 GETTYSBURG WAY
City-St-Zip: TAMPA, FL 33635

Title: VPD () Delete
Name: VASQUEZ, LUIS A
Address: 6914 LARMON STREET
City-St-Zip: TAMPA, FL 33634

Title: T () Delete
Name: FUSTER, JULIO
Address: 8525 NORTH ARMENIA #77
City-St-Zip: TAMPA, FL 33604

Title: SD () Delete
Name: MOREL, JEANETT
Address: 10501 LACERA DRIVE
City-St-Zip: TAMPA, FL 33634

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: COLLIER, VIOLETA
Address: 4702 SOAPSTONE DR
City-St-Zip: TAMPA, FL 33615

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: MIRTHA E MILLER

PD

02/04/2009

Electronic Signature of Signing Officer or Director

Date