2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26576

Entity Name: MANOS EN ACCION, INC.

FILED Feb 06, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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240 EAST 1AVENUE

SUITE 115

HIALEAH, FL 33016 US

New Mailing Address: Current Mailing Address:

240 EAST 1 AVENUE SUITE 115

HIALEAH, FL 33010 US

FEI Number: 65-0058302 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FORS, LUIS A 11890 S.W. 8TH STREET - PH-6 MIAMI, FL 33184

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete SUAREZ, MARIA VALDES, ANGEL P Name: Name: Address: 6000 SW 96TH AVENUE Address: 5836 NW 197TH TERRACE

HIALEAH, FL 33015 City-St-Zip: MIAMI, FL 33173 City-St-Zip:

Title: () Delete Title: (X) Change () Addition Name: BENACH, TERE Name: DEMAHY, ANA M

Address: 220 ALHAMBRA CIRCLE Address: 8593 ARDOCH ROAD City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: MIAMI LAKES, FL 33016

Title: () Delete Title: (X) Change () Addition RICHARD, AMUNDSEN G Name: VALENCIA, ELIZABETH Name:

6455 NW 36TH STREET, 402 9795 SW 62ND STREET Address: Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip: MIAMI, FL 33173

Title: () Delete Title: S/ T () Change (X) Addition

Name: Name: CONCEPCION, DAVID 240 WEST 61ST STREET Address: Address: City-St-Zip: City-St-Zip: HIALEAH, FL 33012

Title: () Delete Title: () Change (X) Addition

AMUNDSEN, RICHARD G Name: Name: 1125 GREENWAY DRIVE Address: Address: City-St-Zip: City-St-Zip: CORAL GABLES, FL 33134

Title: () Delete Title: () Change (X) Addition

BOVO, ESTEBAN Name: Name: Address: Address: 765 WEST 76TH STREET HIALEAH, FL 33014 City-St-Zip: 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.

APV SIGNATURE: ANGEL P. VALDES 02/06/2008