

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26576

FILED
Feb 24, 2009
Secretary of State

Entity Name: MANOS EN ACCION, INC.

Current Principal Place of Business:

6250 WEST 21 CT.
HIALEAH, FL 33016 US

New Principal Place of Business:

Current Mailing Address:

6250 WEST 21 CT.
HIALEAH, FL 33016 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

FORS, LUIS A
11890 S.W. 8TH STREET - PH-6
MIAMI, FL 33184 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: P () Delete
Name: VALDES, ANGEL P
Address: 5836 NW 197TH TERRACE
City-St-Zip: HIALEAH, FL 33015

Title: VP () Delete
Name: DEMAHY, ANA M
Address: 8593 ARDOCH ROAD
City-St-Zip: MIAMI LAKES, FL 33016

Title: VP () Delete
Name: VALENCIA, ELIZABETH
Address: 9795 SW 62ND STREET
City-St-Zip: MIAMI, FL 33173

Title: S/ T () Delete
Name: CONCEPCION, DAVID
Address: 240 WEST 61ST STREET
City-St-Zip: HIALEAH, FL 33012

Title: D () Delete
Name: AMUNDSEN, RICHARD G
Address: 1125 GREENWAY DRIVE
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: BOVO, ESTEBAN
Address: 765 WEST 76TH STREET
City-St-Zip: HIALEAH, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S/T (X) Change () Addition
Name: CONCEPCION, DAVID
Address: 240 WEST 61 ST. STREET
City-St-Zip: HIALEAH, FL 33012

Title: D (X) Change () Addition
Name: HEVIA, BENNY
Address: 683 WEST 34TH STREET
City-St-Zip: HIALEAH, FL 33012

Title: D (X) Change () Addition
Name: HEVIA, BARBARA
Address: 683 WEST 34TH STREET
City-St-Zip: HIALEAH, FL 33012

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: ANGEL P. VALDES

Electronic Signature of Signing Officer or Director

PRES

02/24/2009

Date