

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31670

FILED
Mar 28, 2009
Secretary of State

Entity Name: DIRECTORIO LIBERAL COLOMBIANO DE LA FLORIDA, INC.

Current Principal Place of Business:

9735 NW 52 ST
#222
MIAMI, FL 33178 US

New Principal Place of Business:

Current Mailing Address:

9735 NW 52 ST
#222
MIAMI, FL 33178 US

New Mailing Address:

FEI Number: 65-0442594 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESCALLON, DANIEL
9735 NW 52 ST
#222
MIAMI, FL 33178 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: ESCALLON, DANIEL
Address: 9735 N.W 52 ST
City-St-Zip: MIAMI, FL 33178

Title: VD () Delete
Name: LEON, NIDIA
Address: 105 DEER PATH CT.
City-St-Zip: WESTON, FL 33326

Title: SD () Delete
Name: GÓMEZ, MARIO
Address: 7745 SW 183 TERR
City-St-Zip: MIAMI, FL 33157

Title: TS () Delete
Name: ESCALLON, DANIEL
Address: 9735 NW 52 ST
City-St-Zip: MIAMI, FL 33178

Title: P () Delete
Name: GOMEZ, JEANNETTE
Address: 7745 SW 183 TERR
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: GEORGE, EDGAR
Address: 4847 N.W 108 COURT
City-St-Zip: DORAL, FL 33178

Title: SD (X) Change () Addition
Name: GUZMAN, ECCEHOMO
Address: 19221 N.E. 10 AVENUE
City-St-Zip: NORTH MIAMI, FL 33179

Title: TS (X) Change () Addition
Name: DURAN, EDUARDO
Address: 7971 S.W. 40 ST - UNIT # 10
City-St-Zip: MIAMI, FL 33155

Title: P (X) Change () Addition
Name: INFANTE, RAFAEL
Address: 14240 S.W. 82 AVE
City-St-Zip: MIAMI, FL 33158

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: DANIEL ESCALLON

PD

03/28/2009

Electronic Signature of Signing Officer or Director

Date