

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34438

FILED  
Apr 03, 2007  
Secretary of State

**Entity Name:** LATIN AMERICAN IMMIGRANT AND REFUGEE ORGANIZATION, INC. (LAIRO)

**Current Principal Place of Business:**

4623 FOREST HILL  
SUITE 108-2  
WEST PALM BEACH, FL 33415

**New Principal Place of Business:**

4623 FOREST HILL BOULEVARD  
SUITE 108-2  
WEST PALM BEACH, FL 33415

**Current Mailing Address:**

4623 FOREST HILL  
SUITE 108-2  
WEST PALM BEACH, FL 33415

**New Mailing Address:**

4623 FOREST HILL BOULEVARD  
SUITE 108-2  
WEST PALM BEACH, FL 33415

**FEI Number:** 65-0133693

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLEMENCIA ORTIZ  
36 BUXTON LANE  
BOYNTON BEACH,, FL 33462 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: CD ( ) Delete  
Name: BYTNAR, ROBERT  
Address: 8015 FAIRWAY LN  
City-St-Zip: WEST PALM BEACH, FL 33412

Title: M ( ) Delete  
Name: ORTIZ, CLEMENCIA,  
Address: 36 BUXTON LANE  
City-St-Zip: BOYNTON BEACH,, FL

Title: DT ( ) Delete  
Name: RODRIGUEZ, SHASKIA  
Address: 763 WEST FLAMMANGO COURT  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D ( ) Delete  
Name: LETSCH, BARBARA  
Address: 6211 BOYD LN  
City-St-Zip: LAKE WORTH, FL 33462

**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: DS (X) Change ( ) Addition  
Name: LETSCH, BARBARA  
Address: 6211 BOYD LN  
City-St-Zip: LAKE WORTH, FL 33462

I hereby certify that the information supplied with this filing does not qualify for the 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: CLEMENCIA ORTIZ

M

04/03/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date