

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35403

FILED
Feb 04, 2009
Secretary of State

Entity Name: MISERICORDIA Y VERDAD, INC.

Current Principal Place of Business:

1759 SW 4 ST.
MIAMI, FL 33135 US

New Principal Place of Business:

Current Mailing Address:

1825 SW 4TH ST
MIAMI, FL 33135

New Mailing Address:

FEI Number: 65-0176742

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LARA, ZENaida I.
1825 SW 4TH ST
MIAMI, FL 33135 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: LARA, ZENaida I.,
Address: 1825 SW 4 ST
City-St-Zip: MIAMI, FL

Title: VD () Delete
Name: JIMENEZ, ANA,
Address: 1837 SW 4 ST
City-St-Zip: MIAMI, FL

Title: SD () Delete
Name: JIMENEZ, ANA,
Address: 1837 SW 4 ST
City-St-Zip: MIAMI, FL

Title: TD () Delete
Name: LARA, ZENaida I.,
Address: 1825 SW 4 ST
City-St-Zip: MIAMI, FL

Title: SD () Delete
Name: DIAZ, ULISES
Address: 1638 SW 3 ST
City-St-Zip: MIAMI, FL 33135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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

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: ZENaida LARA

PD

02/04/2009

Electronic Signature of Signing Officer or Director

Date