

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35935

FILED
Aug 07, 2007
Secretary of State

Entity Name: PUERTO RICANS IN FLORIDA, INC.

Current Principal Place of Business:

23319 ABERCORN LN
LAND O LAKES, FL 34639 US

New Principal Place of Business:

Current Mailing Address:

23319 ABERCORN LN
LAND O LAKES, FL 34639 US

New Mailing Address:

FEI Number: 59-2960881 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HERNANDEZ, IRVING
23319 ABERCORN LN
LAND O LAKES, FL 34639 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: D () Delete
Name: TIRADO, NANCY
Address: 4653 SPRUCE LN
City-St-Zip: WEST PALM BEACH, FL 33418 US

Title: D () Delete
Name: DIAZ, CARMEN
Address: 920 ALTAVISTA TER
City-St-Zip: DAVIE, FL 33325 US

Title: D () Delete
Name: MARTELL, LUIS T
Address: 4694 SUSSEX TER
City-St-Zip: ORLANDO, FL 32811 US

Title: D () Delete
Name: HARRELL, KEITH
Address: 4470 NW 102 CT
City-St-Zip: DORAL, FL 33178 US

Title: PD () Delete
Name: COLL, DANNY
Address: PO BOX 270
City-St-Zip: OLDSMAR, FL 34677

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: () 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: FRANCISCO GARCIA DE QUEVEDO

CPA

08/07/2007

Electronic Signature of Signing Officer or Director

Date