

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 17, 2008 08:00 A
Secretary of State

DOCUMENT # N44878

1. Entity Name

YAGUAJAY SOCIAL CLUB 91 CORP.



Principal Place of Business

**1020 NW 34 AVE.
MIAMI FL 33125**

Mailing Address

**1020 NW 34 AVE.
MIAMI FL 33125**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E037 (10/07)

Zip

Country

Zip

Country

4. FEI Number

65-0330577

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BRACERAS, FERMIN, JR.
1020 NW 34 AVE.
MIAMI FL 33125**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and Title (if applicable)

(NOTE: Registered Agent signature is required when registering)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME **VAZQUEZ, FROILAN**
STREET ADDRESS **3824 SW 79TH AVE UNIT 111**
CITY-STATE-ZIP **MIAMI FL 33155**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME **LEIVA, ARNALDO**
STREET ADDRESS **3961 W 8TH AVE**
CITY-STATE-ZIP **HIALEAH FL 33012**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME **BRACERAS, FERMIN**
STREET ADDRESS **1020 NW 34TH AVE**
CITY-STATE-ZIP **MIAMI FL 33125**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME **LOPEZ, DIEGO GUSTAVO**
STREET ADDRESS **6320E 4TH AVE**
CITY-STATE-ZIP **HIALEAH FL 33013**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME **DIZ, LUIS**
STREET ADDRESS **515 W 46TH PL**
CITY-STATE-ZIP **HIALEAH FL 33012**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME **DELGADO, ELSA**
STREET ADDRESS **4250 NW 200 ST**
CITY-STATE-ZIP **CAROL CITY FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; I am the 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 if changed, or on an attachment with an address, with all other like empowered.

Information
of or director
of Block 11

SIGNATURE:

Gina Queen

3-13-08