

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49535

FILED
Jul 16, 2007
Secretary of State

Entity Name: GRUPO FOLKLORE LATINO, INC.

Current Principal Place of Business:

4907 REGINA COURT
WEST PALM BEACH, FL 33415 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 20795
WEST PALM BEACH, FL 33416 US

New Mailing Address:

FEI Number: 65-0328718 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:

Name and Address of New Registered Agent:

ARCE, LILIAN
4907 REGINA CT
WEST PALM BEACH, FL 33415 US

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: P () Delete
Name: ARCE-DIAZ, LILLIAN
Address: 679 HARTTH DR.
City-St-Zip: WEST PALM BEACH, FL 33415 US

Title: VP () Delete
Name: WEST, EMA
Address: 1978 WINDSOR DRIVE
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: T () Delete
Name: SANDRA, PENA
Address: 5108 SHERMAN RD
City-St-Zip: WEST PALM BEACH, FL 33415 US

Title: S () Delete
Name: SAN JUANA, HERNANDEZ
Address: 645 CASPER AVE
City-St-Zip: WEST PALM BEACH, FL 33413 US

Title: D () Delete
Name: GUSTAVO, AMADOR
Address: 125 S. C STREET
City-St-Zip: LAKE WORTH, FL 33460 US

Title: D () Delete
Name: DOMINGUEZ, LAURA
Address: 898 E. COTTON BAY
City-St-Zip: WEST PALM BEACH, FL 33463 US

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:

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: LILIAN ARCE-DIAZ

P

07/16/2007

Electronic Signature of Signing Officer or Director

Date