

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2009
Secretary of State

DOCUMENT# N50953

Entity Name: RUACH-HA KODESH, CORP.

Current Principal Place of Business:

300 NW 27 AVE #306
MIAMI, FL 33125

New Principal Place of Business:

306 NW 27 AVE
MIAMI, FL 33125

Current Mailing Address:

3471 WHITE BLVD
NAPLES, FL 34117

New Mailing Address:

306 NW 27 AVE
MIAMI, FL 33125

FEI Number: 65-0357997 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CLAVAREZA, RENE J
3471 WHITE BLVD.
NAPLES, FL 34117 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: DVM () Delete
Name: IGLESIAS, LEDYS
Address: 3471 WHITE BLVD
City-St-Zip: NAPLES, FL 34117
- Title: DPT () Delete
Name: ALONSO, MARIA P. DE, ROSARIO
Address: 2035 SW 21ST ST
City-St-Zip: MIAMI, FL 33145
- Title: DT () Delete
Name: LANDA, MIGDALIA,
Address: 3471 WHITE BLVD.
City-St-Zip: NAPLES, FL 33964
- Title: CD () Delete
Name: ALONSO, JOSE
Address: 137 SW 5 AVE
City-St-Zip: MIAMI, FL 33130
- Title: DT () Delete
Name: ROSARIO, JOSE LUIS
Address: 2035 SW 21ST ST
City-St-Zip: MIAMI, FL 33145
- Title: DTT () Delete
Name: ALMIROLA, MUARA
Address: 443 SW 21ST RD
City-St-Zip: MIAMI, FL 33129

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: CD (X) Change () Addition
Name: ALONSO, JOSE J
Address: 137 SW 5 AVE
City-St-Zip: MIAMI, FL 33130
- Title: () Change () Addition
Name:
Address:
City-St-Zip:
- Title: DTT (X) Change () Addition
Name: ALMIROLA, MAURA
Address: 443 SW 21ST RD
City-St-Zip: MIAMI, FL 33129

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: JOSE J.ALONSO

CD

01/20/2009

Electronic Signature of Signing Officer or Director

Date