

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50953

FILED  
Jan 07, 2011  
Secretary of State

**Entity Name:** RUACH-HA KODESH, CORP.

**Current Principal Place of Business:**

306 NW 27 AVE  
MIAMI, FL 33125

**New Principal Place of Business:**

729 SW 8 ST  
MIAMI, FL 33130

**Current Mailing Address:**

306 NW 27 AVE  
MIAMI, FL 33125

**New Mailing Address:**

729 SW 8 ST  
MIAMI, FL 33130

**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  
Name: IGLESIAS, LEDYS  
Address: 3471 WHITE BLVD  
City-St-Zip: NAPLES, FL 34117

Title: DPT  
Name: ALONSO, MARIA P. DE ROSARIO  
Address: 2035 SW 21ST ST  
City-St-Zip: MIAMI, FL 33145

Title: DT  
Name: LANDA, MIGDALIA  
Address: 3471 WHITE BLVD.  
City-St-Zip: NAPLES, FL 33964

Title: CD  
Name: ALONSO, JOSE J  
Address: 137 SW 5 AVE  
City-St-Zip: MIAMI, FL 33130

Title: DT  
Name: PRIEGUEZ, CARLOS  
Address: 130 SW 5 AVE APT. 1  
City-St-Zip: MIAMI, FL 33130

Title: DTT  
Name: ALMIROLA, MAURA  
Address: 443 SW 21ST RD  
City-St-Zip: MIAMI, FL 33129

I hereby 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 all other like empowered.

SIGNATURE: JOSE ALONSO

CD

01/07/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date