

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51220

FILED
Apr 19, 2009
Secretary of State

Entity Name: PARTIDO SOCIAL REVOLUCIONARIO DEMOCRATICO INC.

Current Principal Place of Business:

5703 JONES ST
MILTON, FL 32570 US

New Principal Place of Business:

5900 STARLITE LANE
MILTON, FL 32570 US

Current Mailing Address:

P.O. BOX 351081
MIAMI, FL 33135 US

New Mailing Address:

5900 STARLITE LANE
MILTON, FL 32570 US

FEI Number: 65-0364551

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMEON, ROBERTO
5703 JONES ST
MILTON, FL 32570 US

Name and Address of New Registered Agent:

SIMEON, ROBERTO
5900 STARLITE LANE
MILTON, FL 32570 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:

04/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JORGE, VALLS
Address: 9785 SW 123 TERRACE
City-St-Zip: MIAMI, FL

Title: SD () Delete
Name: SIMEON, ROBERTO
Address: 5703 JONES ST
City-St-Zip: MILTON, FL 32570

Title: VPD () Delete
Name: CARABALLO, ROLANDO
Address: 15821 SW 14 CT
City-St-Zip: MIAMI, FL 33137

Title: TD () Delete
Name: NODA, MARIBEL C
Address: 5966 SLEEPY HOLLOW CT
City-St-Zip: MILTON, FL 32570

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: SIMEON, ROBERTO
Address: 5900 STARLITE LANE
City-St-Zip: MILTON, FL 32570

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: ROBERTO SIMEON

SD

04/19/2009

Electronic Signature of Signing Officer or Director

Date