

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51329

FILED
Jan 08, 2009
Secretary of State

Entity Name: STO. NINO SHRINE USA, INC.

Current Principal Place of Business:

20832 CEDAR BLUFF PL
LAND O'LAKES, FL 34538

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 271662
CARROLLWOOD, FL 33688

New Mailing Address:

FEI Number: 59-3144379

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE LA CRUZ, NILDA
547 TALLAHASSEE DR NE
ST. PETERSBURG, FL 33702 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: P () Delete
Name: RAFFINAN, MARIA DR
Address: 2625 WESTVIEW CT
City-St-Zip: CLEARWATER, FL 33761

Title: VP () Delete
Name: CRUZ, ZENALDA
Address: 701 W. MARTIN LUTHER KING
City-St-Zip: TAMPA, FL 33603

Title: T () Delete
Name: REQEDIZA, FATIMA DR
Address: 205 W. MARTIN LUTHER KING
City-St-Zip: TAMPA, FL 33603

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: REGENCIA, FATIMA DR
Address: 205 W. MARTIN LUTHER KING
City-St-Zip: TAMPA, FL 33603

Title: D () Change (X) Addition
Name: DE LA CRUZ, NILDA
Address: 547 TALLAHASSEE DR NE
City-St-Zip: ST PETERSBURG, FL 33702

Title: D () Change (X) Addition
Name: BILBAO, SUSAN N
Address: 20832 CEDAR BLUFF PL
City-St-Zip: LAND OLAKES, FL 34538

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: NILDA DE LA CRUZ

DIR

01/08/2009

Electronic Signature of Signing Officer or Director

Date