## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

## FILED DOCUMENT # N93000000216 Feb 08, 2007 08:00 AM Secretary of State LA VOZ DE SALVACION, INC. Principal Place of Business Mailing Address 462 N.W. 111TH TERRACE MIAMI SHORES FL 33168 462 N.W. 111TH TERRACE MIAMI SHORES FL 33168 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt #, etc Suite, Apt #, etc 1st MOORE CR2E037 (10/06) City & State City & State Applied For 4. FEI Number 65-0380247 Not Applicable Ziρ Country Country \$8.75 Additional Fee Required 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ARROYO, SUSANA Street Address (P.O. Box Number is Not Acceptable) 462 N.W. 11TH TERRACE MIAMI SHORES FL 33168 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to $\Box$ Due By May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State 10, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 HILE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME ARROYO, EDWIN U00000628372 STREET ACCORESS STREET ADDRESS 462 N.W. 111TH TERR CITY ST-ZIP CITY SI- ZIP 02/16/07-80012-026 70.00 MIAMI SHORES FL 33168 ☐ Defete ☐ Change ☐ Addition ARROYO, EDWARD NAME STREET ADDRESS STREET ADDRESS 462 N.W. 111TH TERR CITY - ST-ZIP MIAMI SHORES FL 33168 CHY ST ZIP Delete Щ ☐ Change ☐ Addition D NAML ARROYO, SUSANA NAME STREET ADDRESS STREET ADDRESS 462 N.W. 111 TERR. CITY+ST-7IP CUY-ST-7IP MIAMI SHORES FL 33168 mme ☐ Change ☐ Addition MILE ☐ Delete VOC NAME NAME MELENDEZ, LEONOR SUREET ADDRESS SURFEL ADDRESS 20560 NE 8 CT CITY-ST ZIP CITY ST ZIP NORTH MIAMI BEACH FL 33179 ☐ Change Addition ☐ Delete TITLE IIILE VOC NAME BORRERO, NITZA NAME STREET ADDRESS STREET ADDRESS 2643 BAHAMA DRIVE CITY ST 789 MIRAMAR FL 33023 CITY ST-ZIP ☐ Change Additiemr ☐ Delete DIE VOC NAME NAME ARROYO, ALFREDO STREET ADDRESS STREET ADDRESS 462 NW 111 TERR. CITY-ST-ZIP MIAMI SHORES FL 33168 CITY-ST-ZIP 12. I heroby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 in the control of the corporation or the receiver of the corporation of the receiver of the corporation of the receiver of the corporation of the receiver of the