

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000216

FILED  
Jan 28, 2010  
Secretary of State

Entity Name: LA VOZ DE SALVACION, INC.

**Current Principal Place of Business:**

462 N.W. 111TH TERRACE  
MIAMI SHORES, FL 33168

**New Principal Place of Business:**

**Current Mailing Address:**

462 N.W. 111TH TERRACE  
MIAMI SHORES, FL 33168

**New Mailing Address:**

FEI Number: 65-0380247

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

ARROYO, SUSANA  
462 N.W. 111TH TERRACE  
MIAMI SHORES, FL 33168 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: D  
Name: ARROYO, EDWIN  
Address: 462 N.W. 111TH TERR  
City-St-Zip: MIAMI SHORES, FL 33168

Title: D  
Name: ARROYO, EDWARD  
Address: 462 N.W. 111TH TERR  
City-St-Zip: MIAMI SHORES, FL 33168

Title: D  
Name: ARROYO, SUSANA  
Address: 462 N.W. 111 TERR.  
City-St-Zip: MIAMI SHORES, FL 33168

Title: VOC  
Name: MELENDEZ, LEONOR  
Address: 17111 NE 14 AVE APT 4  
City-St-Zip: MIAMI, FL 33162

Title: VOC  
Name: BORRERO, NITZA  
Address: 2643 BAHAMA DRIVE  
City-St-Zip: MIRAMAR, FL 33023

Title: VOC  
Name: ARROYO, ALFREDO  
Address: 462 NW 111 TERR.  
City-St-Zip: MIAMI SHORES, FL 33168

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: EDWIN ARROYO

P

01/28/2010

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

\_\_\_\_\_  
Date