2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000954

Title:

Name:

Address:

City-St-Zip:

FILED Feb 22, 2008 Secretary of State

Entity Nam	ne: LA VINA D	EL SENOR, INC.		
Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
3801 SW 9 MIAMI, FL				
Current Mailing Address:		New Mailing Address:		
5411 SW 10 MIAMI, FL	04 AVENUE 33165 US			
FEI Number:	65-0389764	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of Cu	ırrent Registered Agent:	Name and Address of	of New Registered Agent:
	KENNETH W 04 AVENUE 33165 US			
The above in the State		ubmits this statement for the pu	rpose of changing its registere	d office or registered agent, or both,
	of Florida. E:	·		d office or registered agent, or both,
in the State	of Florida. E:	ubmits this statement for the pu		d office or registered agent, or both, Date
in the State	of Florida. E:	c Signature of Registered Ager	nt	
in the State	of Florida. E: Electronic	c Signature of Registered Ager ORS: Delete NETH W /ENUE	nt	Date
in the State SIGNATUR OFFICERS Title: Name: Address:	of Florida. Electronic AND DIRECT P () I SCHAFER, KENN 5411 SW 104 AV MIAMI, FL 33166	C Signature of Registered Ager ORS: Delete NETH W /ENUE 5 US Delete	ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS:
in the State SIGNATUR OFFICERS Title: Name: Address: City-St-Zip: Title: Name: Address:	of Florida. E: Electronic AND DIRECT P () [SCHAFER, KENN 5411 SW 104 AV MIAMI, FL 3316: S () [REYES, BARBY 5544 SW STREE MIAMI, FL 3313:	C Signature of Registered Ager ORS: Delete VETH W VENUE 5 US Delete ET 4 Delete TO ERR	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS: () Change () Addition

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: KENNETH W. SCHAFER Ρ 02/22/2008

() Delete

MORALES, LEO

MIAMI, FL 33145

2675 SW 26TH TERR

() Change () Addition