

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003934

FILED  
Feb 09, 2006  
Secretary of State

Entity Name: MIAMI-MANAGUA LIONS CLUB, INC.

**Current Principal Place of Business:**

14793 SW 81 ST  
MIAMI, FL 33193 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 831388  
MIAMI, FL 332831388 US

**New Mailing Address:**

FEI Number: 65-0432716      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

ROA, EDGAR E  
14793 SW 81 STREET  
MIAMI, FL 33193 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: PD ( ) Delete  
Name: HISLOP, EDUARDO  
Address: 1900 NORTHWEST 135 STREET  
City-St-Zip: MIAMI, FL 33167

Title: SD ( ) Delete  
Name: CHANG, ALFONSO  
Address: 640 SOUTHWEST 114 COURT  
City-St-Zip: MIAMI, FL 33174

Title: DT ( ) Delete  
Name: ABDALLAH, FADYLLA  
Address: 9923 W COKKECHOBEE RD #313-D  
City-St-Zip: HIALEAH, FL 33016

Title: DV ( ) Delete  
Name: BARQUERO, SOL  
Address: 1734 SW 102 CT  
City-St-Zip: MIAMI, FL 33165

Title: DV ( ) Delete  
Name: TELLEZ, OCTAVIO  
Address: 1123 SOUTHWEST 88 AVENUE  
City-St-Zip: MIAMI, FL 33174

Title: DV ( ) Delete  
Name: AVILES, ANA M  
Address: 8625 NW 8 STREET #112  
City-St-Zip: MIAMI, FL 33126

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: RAWLINGS, MARIA M  
Address: 12444 N. BAYSHORE DRIVE  
City-St-Zip: NORTH MIAMI, FL 33181

Title: TD (X) Change ( ) Addition  
Name: CHANG, ALFONSO  
Address: 640 SOUTHWEST 114 COURT  
City-St-Zip: MIAMI, FL 33174

Title: SD (X) Change ( ) Addition  
Name: ZUNIGA, MARGARITA  
Address: 1600 NE 135 ST, #311  
City-St-Zip: NORTH MIAMI, FL 33181

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 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: EDGAR E. ROA

RA

02/09/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date