


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 10, 2007 8:00 am
Secretary of State

05-10-2007 90026 026 ****70.00

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1. Entity Name
MIAMI-MANAGUA LIONS CLUB, INC.



Principal Place of Business
14793 SW 81 ST
MIAMI, FL 33193 US

Mailing Address
P.O. BOX 831388
MIAMI, FL 33283-1388 US

2. Principal Place of Business - No P.O. Box #
19720 GULFSTREAM RD
 Suite, Apt. #, etc.

3. Mailing Address
3081 NW 6 ST.
 Suite, Apt. #, etc.

City & State
MIAMI, FLORIDA 33157

City & State
MIAMI, FL 33125

Zip
33157

Country
USA

Zip
33125

Country
USA

40110260



04272007 Chg-NP CR2E037 (12/06)

4. FEI Number
65-0432716

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

ROA, EDGAR E
14793 SW 81 STREET
MIAMI, FL 33193

7. Name and Address of New Registered Agent

Name **SARA ABDALLAH**

Street Address (P.O. Box Number is Not Acceptable)
19720 GULFSTREAM RD

City **MIAMI** **FL** Zip Code **#33125**

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 **SARA ABDALLAH, PRESIDENT** X  **04-27-2007**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RAWLINGS, MARIA M 12444 N. BAYSHORE DRIVE NORTH MIAMI, FL 33181	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CHANG, ALFONSO 640 SOUTHWEST 114 COURT MIAMI, FL 33174	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ZUNIGA, MARGARITA 1600 NE 135 ST, #311 NORTH MIAMI, FL 33181	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BARQUERO, SOL 1734 SW 102 CT MIAMI, FL 33165	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV TELLEZ, OCTAVIO 1123 SOUTHWEST 88 AVENUE MIAMI, FL 33174	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV AVILES, ANA M 8625 NW 8 STREET #112 MIAMI, FL 33126	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President SARA ABDALLAH 19720 GULFSTREAM RD MIAMI, FL 33157	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary EDGAR MACIAS 3081 NW 6 ST MIAMI, FL 33125	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer ENRIQUETA MOLINARES 6401 SW 23 ST MIAMI, FL 33155	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1st. V. President MARGARITA ZUNIGA 1600 NE 135 St. # 1003 MIAMI, FL 33181	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2nd. V. President ALFONSO OGANG 640 SW 114 CT MIAMI, FL 33174	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3er. V. President ANASTASIO MONGALO P.O. BOX 655228 MIAMI, FL 33265	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **EDGAR MACIAS** **04-27-2007** **786-473-6259**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #