

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004774

FILED  
Jul 02, 2007  
Secretary of State

Entity Name: MINORITIES EXPRESSION, INC.

**Current Principal Place of Business:**

8303 S.W. 144 COURT  
MIAMI, FL 33183

**New Principal Place of Business:**

**Current Mailing Address:**

8303 S.W. 144 COURT  
MIAMI, FL 33183

**New Mailing Address:**

FEI Number: 65-0454655      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

MANTILLA, RAQUEL P  
8303 SW 144 CT  
MIAMI, FL 33183      US

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: MANTILLA, RAQUEL P  
Address: 8303 SW 144 CT  
City-St-Zip: MIAMI, FL 33183

Title: VD      ( ) Delete  
Name: ROMERO, ALFONSO  
Address: 1027 EUCLID AVENUE  
City-St-Zip: MIAMI BEACH, FL

Title: STD      ( ) Delete  
Name: ROMERO, FERNANDO  
Address: 4700 NW 7TH STREET  
City-St-Zip: MIAMI, FL

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

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: RAQUEL MANTILLA

PD

07/02/2007

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

\_\_\_\_\_  
Date