

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005176

FILED
Apr 29, 2008
Secretary of State

Entity Name: STO. NINO (SINULOG) OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

8180 NW 47 DR
CORAL SPRINGS, FL 33067 US

New Principal Place of Business:

Current Mailing Address:

8180 NW 47 DR
CORAL SPRINGS, FL 33067 US

New Mailing Address:

FEI Number: 65-0453492

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LIM, PRECY
8180 NW 47 DRIVE
CORAL SPRINGS, FL 33067 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 () Delete
Name: LIM, PRECY
Address: 8180 NW 47 DR
City-St-Zip: CORAL SPRINGS, FL

Title: VD () Delete
Name: SHARMA, JENNIFER
Address: 4291 NW 49TH AVE
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: PD () Delete
Name: BACALTOS, ALLAN D
Address: 4921 NW 94TH TERR
City-St-Zip: SUNRISE, FL 33351

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: PRECY LIM

D

04/29/2008

Electronic Signature of Signing Officer or Director

Date