

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002578

FILED
May 07, 2007
Secretary of State

Entity Name: CLUB HUANCAYO DE MIAMI, INC.

Current Principal Place of Business:

11360 SW 160 AVE
MIAMI, FL 33196

New Principal Place of Business:

Current Mailing Address:

11360 SW 160 AVE
MIAMI, FL 33196

New Mailing Address:

5800 SW 92 AVENUE
MIAMI, FL 33173

FEI Number: 65-0492828 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

ULLOA, SAUL
11360 SW 160 AVE
MIAMI, FL 33196z9y US

Name and Address of New Registered Agent:

ULLOA, SAUL
11360 SW 160 AVE
MIAMI, FL 33196Z9Y 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: _____

05/07/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ULLOA, SAUL
Address: 11360 SW 160 AVE
City-St-Zip: MIAMI, FL 33196

Title: V () Delete
Name: PAJARES, JULVER
Address: 13700 SW 62 MST APT 143
City-St-Zip: MIAMI, FL 33183

Title: S () Delete
Name: ALVA, YOLANDA
Address: 5800 SW 92 AVE
City-St-Zip: MIAMI, FL 33173

Title: T () Delete
Name: AWUAPARA, OLGA
Address: 2121 CORAL WAY
City-St-Zip: MIAMI, FL 33145

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:

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: YOLANDA ALVA

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05/07/2007

Electronic Signature of Signing Officer or Director

Date