

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002675

FILED
Jul 16, 2009
Secretary of State

Entity Name: KIWANIS CLUB CORAL GABLES LATIN, INC.

Current Principal Place of Business:

782 NW 42ND AVENUE
SUITE #328
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

782 NW 42ND AVENUE
SUITE #328
MIAMI, FL 33126

New Mailing Address:

FEI Number: 65-0495620 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:

SOLANO, AQUILES R
782 NW 42ND AVENUE
SUITE #328
MIAMI, FL 33126 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: P () Delete
Name: SOLANO, AQUILES R
Address: 782 NW 42 AVE 328
City-St-Zip: MIAMI, FL 33126

Title: D/T () Delete
Name: VARONA, SERGIO D
Address: 482 NW 42 AVE 328
City-St-Zip: MIAMI, FL 33126

Title: D/S () Delete
Name: AVILA, GLADYS
Address: 782 NW 42 AVE 328
City-St-Zip: MIAMI, FL 33126

Title: D () Delete
Name: DIAZ, JOHN
Address: 782 NW 42 AVE 328
City-St-Zip: MIAMI, FL 33126

Title: D () Delete
Name: MARTINEZ, JUAN
Address: 782 NW 42 AVE 328
City-St-Zip: MIAMI, FL 33126

Title: D () Delete
Name: HERNANDEZ, JOSE M
Address: 782 NW 42 AVE 328
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SOLANO, YOLANDA
Address: 782 NW 42 AVE 328
City-St-Zip: MIAMI, FL 33126

Title: EXD (X) Change () Addition
Name: SOLANO, AQUILES R
Address: 782 NW 42 AVE. 328
City-St-Zip: MIAMI, FL 33126

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

Title: VPD (X) Change () Addition
Name: SOLANO, AQUILES J
Address: 782 NW 42 AVE 328
City-St-Zip: MIAMI, FL 33126

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 SOLANO

P

07/16/2009

Electronic Signature of Signing Officer or Director

Date