

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005186

FILED  
Apr 03, 2009  
Secretary of State

**Entity Name:** GRAN LOGIA UNIDA DE LAS ANTILLAS DE A.L. Y A.M., INC.

**Current Principal Place of Business:**

1883 SW 1ST ST  
MIAMI, FL 33135

**New Principal Place of Business:**

**Current Mailing Address:**

1883 SW 1ST ST  
MIAMI, FL 33135

**New Mailing Address:**

**FEI Number:** 65-0528571

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BENITEZ, JUAN M  
2400 SW 83RD AVE  
MIAMI, FL 33155 US

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

BENITEZ, JUAN M  
1883 SW 1ST ST  
MIAMI, FL 33135 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:

04/03/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: SARDINA, PEDRO  
Address: 5501 NW 7TH ST, APT 311  
City-St-Zip: MIAMI, FL 33136

Title: PD ( ) Delete  
Name: SARDINA, HECTOR  
Address: 5203 SW 89 AVE  
City-St-Zip: MIAMI, FL 33165

Title: TD ( ) Delete  
Name: BENITEZ, JUAN M  
Address: 2400 SW 83 AVE  
City-St-Zip: MIAMI, FL 33155

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

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

Title: PD (X) Change ( ) Addition  
Name: RODRIGUEZ, LUIS  
Address: 14314 SW 9 TERR  
City-St-Zip: MIAMI, FL 33184

Title: TD (X) Change ( ) Addition  
Name: BENITEZ, JUAN M  
Address: 7931 SW 40 ST STE 29  
City-St-Zip: MIAMI, FL 33155

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: JUAN M BENITEZ

TD

04/03/2009

Electronic Signature of Signing Officer or Director

Date