

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003665

FILED
Feb 13, 2008
Secretary of State

Entity Name: BAILES FERRER, INC.

Current Principal Place of Business:

16030 LA COSTA DR
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

16030 LA COSTA DR
WESTON, FL 33326

New Mailing Address:

FEI Number: 65-0628023

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERRER, DAMARIS I
16030 LA COSTA DR
WESTON, FL 33326 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: PTDD () Delete
Name: FERRER, DAMARIS I
Address: 16030 LA COSTA DR
City-St-Zip: WESTON, FL 33326

Title: V () Delete
Name: MARQUEZ, NIURCA
Address: 7800 CARLYLE AVE #3A
City-St-Zip: MIAMI BEACH, FL 33141

Title: D () Delete
Name: SANTANA, NOEMI
Address: 407 HUNTER AVE
City-St-Zip: CITY ISLAND, NY 10464

Title: D () Delete
Name: CHAFFIN, LILIANA
Address: 3510 SOUTHERN ORCHARD RD
City-St-Zip: DAVIE, FL 33328

Title: BM () Delete
Name: OVERTON, JUNIA
Address: 1387 SW 7TH ST
City-St-Zip: BOCA RATON, FL 33486

Title: () Delete
Name:
Address:
City-St-Zip:

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:

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

Title: BM () Change (X) Addition
Name: CASSANDRA, RIOS
Address: P.O BOX 450564
City-St-Zip: SUNRISE, FL 33345

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: DAMARIS I FERRER

PTDD

02/13/2008

Electronic Signature of Signing Officer or Director

Date