2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2009
Secretary of State

DOCUMENT# N96000001088

Entity Name: EL FUTURO DE AMERICA "DI NO A LAS DROGAS CLUB", CORP.

Current Principal Place of Business:

65 OLIVER DRIVE
HIALEAH, FL 33010

New Principal Place of Business:

Current Mailing Address:

65 OLIVER DRIVE
HIALEAH, FL 33010

New Mailing Address:

FEI Number: 65-0650124 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PEREZ, BACILIA
65 OLIVER DRIVE
HIALEAH, FL 33010 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:	PD	( ) Delete
Name:	PEREZ, BACILIA	
Address:	65 OLIVER DRIVE	
City-St-Zip:	HIALEAH, FL 33010	
Title:	SD	( ) Delete
Name:	PEREZ, MODESTO	
Address:	65 OLIVER DRIVE	
City-St-Zip:	HIALEAH, FL 33010	
Title:	TD	( ) Delete
Name:	PEREZ, PRISCILA	
Address:	65 OLIVER DRIVE	
City-St-Zip:	HIALEAH, FL 33010	
Title:	V	( ) Delete
Name:	GOTERA, BARBARA	
Address:	65 OLIVE DRIVE	
City-St-Zip:	HIALEAH, FL 33010	
Title:	D	( ) Delete
Name:	CERECEDA, MARK	
Address:	65 OLIVE DRIVE	
City-St-Zip:	HIALEAH, FL 33010	
Title:	D	( ) Delete
Name:	FELIX, ROSARIO	
Address:	65 OLIVE DRIVE	
City-St-Zip:	HIALEAH, FL 33010	

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:	( ) 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: BACILIA PEREZ PRES 03/30/2009

Electronic Signature of Signing Officer or Director — Date