## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000006370

Entity Name: ECUADORIAN AMERICAN CLUB, INC.

Apr 23, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Current Principal Place of Business:	New Principal Place of Business

1011 FAIRFAX N WESTON, FL 33326

**Current Mailing Address: New Mailing Address:** 

PO BOX 266304 WESTON, FL 33326

FEI Number: 65-0705506 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GUERRA, ROSIE ZAPATIER, MARGARITA 1420 NW 20THJ AVE 202 4215 N.UNIVERSITY DR. DELRAY BEACH, FL 33445 US #314 SUNRISE, FL 33351 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: MARGARITA ZAPATIER 04/23/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete GUERRA, ROSIE ZAPATIER, MARGARITA Name: Name: Address: 1420 NW 20TH AVE 202 Address: 4215 N. UNIVERSITY DR. # 314 City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: SUNRISE, FL 33351

Title: PD () Delete Title: () Change () Addition

PEREGRINA, MIRYAM Name: Name: Address: 5255 COLLINS AVE..APT.8B Address: City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition DYMOND, MONSY Name: SILVA, FABIOLA Name:

201 RACKET CLUB RD. APT. N.204 **5818 NW 80 TERRACE** Address: Address:

City-St-Zip: PARKLAND, FL 33067 City-St-Zip: WESTON, FL 33326

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: MARGARITA ZAPATIER TD 04/23/2008