

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001095

FILED
Apr 25, 2008
Secretary of State

Entity Name: HERMANDAD DEL SENOR LOS MILAGROS DE MIAMI, INC.

Current Principal Place of Business:

9200 S.W. 107TH AVENUE
MIAMI, FL 33176

New Principal Place of Business:

14187 SW 72ND STREET
MIAMI, FL 33183

Current Mailing Address:

14236 SW 164TH TERRACE
MIAMI, FL 33177

New Mailing Address:

15641 SW 112TH WAY
MIAMI, FL 33196

FEI Number: 65-0730835

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARCHERI, MARIA N
14236 SW 164TH TERRACE
MIAMI, FL 33177 US

Name and Address of New Registered Agent:

CARCHERI, MARIA N
15641 SW 112TH WAY
MIAMI, FL 33196 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: CARCHERI, MARIA N

04/25/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GARCIA, LUIS N
Address: 20414 SW 83RD AVENUE
City-St-Zip: MIAMI, FL 33189

Title: CSD () Delete
Name: CARCHERI, MARIA N
Address: 14236 SW 164TH TERRACE
City-St-Zip: MIAMI, FL 33177

Title: D () Delete
Name: SAKAY, VICTOR T
Address: 21448 SW 89 PATH
City-St-Zip: MIAMI, FL 33189

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GARCIA, LUIS N
Address: 15641 SW 112TH WAY
City-St-Zip: MIAMI, FL 33196

Title: CSD (X) Change () Addition
Name: CARCHERI, MARIA N
Address: 15641 SW 112TH WAY
City-St-Zip: MIAMI, FL 33196

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: GARCIA, LUIS N

PD

04/25/2008

Electronic Signature of Signing Officer or Director

Date