

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001958

FILED
Jan 02, 2007
Secretary of State

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

Current Principal Place of Business:

7955 N.W. 64 ST
MIAMI, FL 33166 US

New Principal Place of Business:

Current Mailing Address:

7955 N.W. 64 ST.
MIAMI, FL 33166 US

New Mailing Address:

FEI Number: 65-0761127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONSTANTINO, MANUEL TRES
1801 N.E. 172 ST.
N.MIAMI BEACH, FL 33162 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: PRES () Delete
Name: VASQUEZ, TEODORO PRES
Address: 3820 N.W. 63 CT.
City-St-Zip: VIRGINIA GARDENS, FL 33166

Title: SEC () Delete
Name: CACEDA, ALDO SEC
Address: 11291 N.W. 15 CT.
City-St-Zip: PEMBROKE PINES, FL 33026

Title: TRES () Delete
Name: CONSTANTINO, MANUEL TRES
Address: 1801 N. E. 172 ST.
City-St-Zip: N. MIAMI BEACH, FL 33162

Title: PR () Delete
Name: WALLING, HENRY PR
Address: 7301 S. WATERWAY DR.
City-St-Zip: MIAMI, FL 33155

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: HENRY WALLING

PR

01/02/2007

Electronic Signature of Signing Officer or Director

Date