2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# N97000001958

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:

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

FEI Number: 65-0761127 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CONSTANTINO, MANUEL TRES
15683 N.W. 12 RD.
PEMBROKE PINES, FL 33028 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 US

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

Title: TRES ( ) Delete
Name: CONSTANTINO, MANUEL TRES
Address: 15683 N.W. 12 RD.
City-St-Zip: PEMBROKE PINES, FL 33028 US

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

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 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 03/27/2009

Electronic Signature of Signing Officer or Director — Date