

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 16, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # N97000002670**

1. Entity Name  
**SAN PABLO MISSION, INC.**



Principal Place of Business  
**571 S.W. 71ST COURT  
MIAMI, FL 33144**

Mailing Address  
**571 S.W. 71ST COURT  
MIAMI, FL 33144**



07112008 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>31-1546526</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**MENA, JOSE L  
571 S.W. 71ST COURT  
MIAMI, FL 33144**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$81.25  
Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	MENA, JOSE L REV, DR
STREET ADDRESS	571 S.W. 71ST COURT
CITY-ST-ZIP	MIAMI, FL 33144

TITLE	DS
NAME	ALVAREZ, LUIS
STREET ADDRESS	571 S.W. 71ST COURT
CITY-ST-ZIP	MIAMI, FL 33144

TITLE	D
NAME	MENA, JUAN CARLOS
STREET ADDRESS	571 S.W. 71ST COURT
CITY-ST-ZIP	MIAMI, FL 33144

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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07/16/08-80002-008 61.25

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Father Inebulena*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*July 11, 2008*

Date

*(845) 452-8250*

Daytime Phone #