2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N97000005905

RT FILED Jul 22, 2009 Secretary of State

urrent P	Principal Place of Business:	New Principal Place of Business:
	TE STREET ST, FL 33040	
urrent M	Mailing Address:	New Mailing Address:
	TE STREET ST, FL 33040	
El Number	r: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
lame and	d Address of Current Registered Agen	t: Name and Address of New Registered Agent:
328 WHI	S, FAUSTO TE ST ST, FL 33040 US	
	71,12 33040 33	
he above	,	the purpose of changing its registered office or registered agent, or bot
he above	e named entity submits this statement for e of Florida. RE:	
he above the State	e named entity submits this statement for e of Florida.	
The above the State	e named entity submits this statement for e of Florida. RE:	the purpose of changing its registered office or registered agent, or both d Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTO
he above the State GNATUI	e named entity submits this statement for te of Florida. RE: Electronic Signature of Registered	d Agent Date
the above the State	e named entity submits this statement for the of Florida. RE: Electronic Signature of Registered S AND DIRECTORS: D () Delete AMADOR, JOSE A 1213 1ST ST., LOT Q	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: () Change () Addition Name: Address:
he above the State IGNATUI PFFICER ttle: ame: ddress: ity-St-Zip: ttle: ame: ddress:	e named entity submits this statement for the of Florida. RE: Electronic Signature of Registered Stand Directors: D () Delete AMADOR, JOSE A 1213 1ST ST., LOT Q KEY WEST, FL 33040 T () Delete DOMINGUEZ, BELKIS 5501 3RD AVE. #265	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: () Change () Addition Name: Address: City-St-Zip: Title: D (X) Change () Addition Name: DOMINGUEZ, BELKIS Address: 5501 3RD AVE. #265

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: FAUSTO MORALES 07/22/2009 D