

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003748

FILED
Apr 29, 2009
Secretary of State

Entity Name: CARNAVALES SANTIAGUEROS, INC.

Current Principal Place of Business:

6854 W FLAGLER ST
MIAMI, FL 33144

New Principal Place of Business:

6878 W FLAGLER ST
MIAMI, FL 33144

Current Mailing Address:

6854 W FLAGLER ST
MIAMI, FL 33144

New Mailing Address:

6878 FLAGLER ST
MIAMI, FL 33144

FEI Number: 65-0901526

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAQUI, ROXI
8025 SW 19 STREET
MIAMI, FL 33155 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: PD () Delete
Name: SAQUI, ROXI
Address: 8025 SW 19TH ST
City-St-Zip: MIAMI, FL 33155

Title: TD () Delete
Name: CARRAZANA, JOSE
Address: 8300 SW 107TH AVE #207
City-St-Zip: MIAMI, FL 33176

Title: S () Delete
Name: MARTIN, DIONISIO
Address: 6854 W FLAGLER ST
City-St-Zip: MIAMI, FL 33144

Title: VPD () Delete
Name: SAQUI, ALFONSO
Address: 4010 SW 125 AVE
City-St-Zip: MIAMI, FL 33175

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: ROXI SAQUI

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date