## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000005565

FILED Apr 16, 2009 Secretary of State

Entity Name: RED SUNSET MERCHANTS ASSOCIATION OF SOUTH MIAMI, INC.

**Current Principal Place of Business: New Principal Place of Business:** 5850 B SUNSET DRIVE SOUTH MIAMI, FL 33143 **Current Mailing Address: New Mailing Address:** 5850 B SUNSET DRIVE SOUTH MIAMI, FL 33143 FEI Number: 65-0987639 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BERRONES, EDDIE 5850 B SUNSET DRIVE SOUTH MIAMI, FL 33143 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete (X) Change ( ) Addition BERRONES, EDDIE BERRONES, EDDIE Name: Name: 5850 B SUNSET DRIVE Address: 5850 B SUNSET DRIVE Address: City-St-Zip: S. MIAMI, FL City-St-Zip: S. MIAMI, FL 33143 Title: () Delete Title: (X) Change ( ) Addition FLORES, VERONICA Name: FLORES, VERONICA Name: Address: 5822 SUNSET DRIVE Address: 5750 SUNSET DRIVE City-St-Zip: S. MIAMI, FL City-St-Zip: S. MIAMI, FL 33143 Title: () Delete Title: (X) Change ( ) Addition ABRIL, ALEX MARK, TRZUPOK Name: Name: 5841 SUNSET DRIVE 5750 SUNSET DRIVE Address: Address: City-St-Zip: S. MIAMI, FL City-St-Zip: S. MIAMI, FL 33143 Title: () Delete Title: SEC ( ) Change (X) Addition Name: Name: AMY, DONNER Address: Address: 5750 SUNSET DRIVE City-St-Zip: City-St-Zip: S. MIAMI, FL 33143 Title: () Delete Title: RSEC ( ) Change (X) Addition ED, DE LA TORRE Name: Name: 5750 SUNSET DRIVE Address: Address: City-St-Zip: City-St-Zip: S. MIAMI, FL 33143 Title: () Delete Title: ( ) Change (X) Addition JOHN, SORGIE Name: Name: Address: Address: 5750 SUNSET DRIVE S. MIAMI, FL 33143 City-St-Zip: 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: EDDIE BERRONES P 04/16/2009