

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006308

FILED  
Jan 07, 2009  
Secretary of State

Entity Name: CODEL, INC.

**Current Principal Place of Business:**

1223 SW 4TH ST.  
MIAMI, FL 331302038

**New Principal Place of Business:**

1223 SW 4TH ST.  
MIAMI, FL 33135

**Current Mailing Address:**

1223 SW 4TH ST.  
MIAMI, FL 331302038

**New Mailing Address:**

1223 SW 4TH ST.  
MIAMI, FL 33135

FEI Number: 65-1046219

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DIAZ, GUARIONE M  
1223 SW 4TH ST.  
MIAMI, FL 331302038 US

**Name and Address of New Registered Agent:**

DIAZ, GUARIONE M  
1223 SW 4TH ST.  
MIAMI, FL 33135 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:

01/07/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DIAZ, GUARIONE M  
Address: 1223 SW 4TH ST.  
City-St-Zip: MIAMI, FL 331352407

Title: D ( ) Delete  
Name: ALLEN, WILFREDO O  
Address: 2250 SW 3RD AVE SUITE 201  
City-St-Zip: MIAMI, FL 33129

Title: T ( ) Delete  
Name: SWITZER, RAQUEL C  
Address: 1390 SOUTH DIXIE HWY, STE 1108  
City-St-Zip: CORAL GABLES, FL 331462944

Title: S ( ) Delete  
Name: SANTANA, CRISTINA  
Address: 1223 SW 4TH ST.  
City-St-Zip: MIAMI, FL 33155

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: DIAZ, GUARIONE M  
Address: 1223 SW 4TH ST.  
City-St-Zip: MIAMI, FL 33135

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: SWITZER, RAQUEL C  
Address: 1390 SOUTH DIXIE HWY, STE 1108  
City-St-Zip: CORAL GABLES, FL 33146

Title: S (X) Change ( ) Addition  
Name: SANTANA, CRISTINA  
Address: 1223 SW 4TH ST.  
City-St-Zip: MIAMI, FL 33135

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: GUARIONE M. DIAZ

P

01/07/2009

Electronic Signature of Signing Officer or Director

Date