

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000003331

FILED
Apr 16, 2009
Secretary of State

Entity Name: CULTURAL DYNAMICS SPECIALISTS-INTERPRETERS AND TRANSLATORS, INC.

Current Principal Place of Business:

4001 W. MARTIN LUTHER KING BLVD.
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

PO BOX 273301
TAMPA, FL 33688

New Mailing Address:

FEI Number: 04-3615704

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIFONTES, VIVIAM
15821 COUNTRY LAKE DR.
TAMPA, FL 33624 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SIFONTES, VIVIAM
Address: 15821 COUNTRY LAKE DR.
City-St-Zip: TAMPA, FL 33624

Title: VP () Delete
Name: SIFONTES, VILNA
Address: 7104 HALIFAX CT
City-St-Zip: TAMPA, FL 33615

Title: SEC () Delete
Name: SIFONTES, OLIVIA J
Address: 9211 W. PATTERSON ST.
City-St-Zip: TAMPA, FL 33615

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VILNA SIFONTES

VP

04/16/2009

Electronic Signature of Signing Officer or Director

Date