

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000059009

**FILED**  
**Jan 11, 2007**  
**Secretary of State**

**Entity Name:** LATIN AMERICAN ACCOUNTING SERVICES, INC.

**Current Principal Place of Business:**

1800 WEST 49TH STREET  
SUITE 134  
HIALEAH, FL 33012

**New Principal Place of Business:**

**Current Mailing Address:**

1800 WEST 49TH STREET  
134  
HIALEAH, FL 33012

**New Mailing Address:**

**FEI Number:** 37-1446340      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

PENA, JUAN  
2455 WEST 67TH PLACE  
BUILDING 10 UNIT 14  
HIALEAH, FL 33016 US

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

PENA, JUAN  
1800 WEST 49TH STREE  
121  
HIALEAH, FL 33012 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: JUAN PENA

01/11/2007

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: PENA, JUAN  
Address: 2455 WEST 67TH PLACE BLDNG 10 UNIT 14  
City-St-Zip: HIALEAH, F 33016

Title: VP ( ) Delete  
Name: MORALES, ISABEL  
Address: 2455 WEST 67TH PLACE BLDNG 10 UNIT 14  
City-St-Zip: HIALEAH, FL 33016

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

Title: P (X) Change ( ) Addition  
Name: PENA, JUAN  
Address: 1800 WEST 49TH STREET STE 121  
City-St-Zip: HIALEAH, F 33012

Title: VP (X) Change ( ) Addition  
Name: PENA, ISABEL  
Address: 1800 WEST 49TH STREET STE 121  
City-St-Zip: HIALEAH, FL 33012

I hereby certify that the information supplied with this filing does not qualify for the 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: ISABEL PENA

VP

01/11/2007

Electronic Signature of Signing Officer or Director

Date