

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 08:00 AM
Secretary of State

DOCUMENT # P04000043976

1. Entity Name
PROYECTO MEMORIA, INC.



Principal Place of Business
**516 NW 59TH AVENUE
MIAMI, FL 33126**

Mailing Address
**516 NW 59TH AVENUE
MIAMI, FL 33126**

DO NOT WRITE IN THIS SPACE



01242007 No Chg-P CR2E034 (11/05)

4. FEI Number
20-0856616

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MORENO, ALEJANDRO
516 NW 59TH AVENUE
MIAMI, FL 33126**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Alejandro Moreno
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/26/07
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
MORENO, ALEJANDRO
516 NW 59TH AVENUE
MIAMI, FL 33126**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
ALONSO, BONIFACIO F
3165 SW 4TH STREET
MIAMI, FL 33135**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
LIMA, JOSE A
4345 SW 117TH AVENUE
MIAMI, FL 33175**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
DE GUZMAN, JORGE J
12823 SW 45TH TERRACE
MIAMI, FL 33175**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
MARTINEZ-PAZ, ORLANDO
756 WEST 53RD TERRACE
HIALEAH, FL 33012**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000686208
04/09/07-80037-008 158.75

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Alejandro Moreno
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/07
Date

Daytime Phone #