

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000134137

FILED
Apr 30, 2009
Secretary of State

Entity Name: HIALEAH MIAMI LAKES HOUSE OF FADES, CORP.

Current Principal Place of Business:

8275 W 12 AVE
107
HIALEAH, FL 33014

New Principal Place of Business:

Current Mailing Address:

8275 W 12 AVE
107
HIALEAH, FL 33014

New Mailing Address:

FEI Number: 20-5765987 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARIAS, ALEJANDRO
8275 W 12 AVE
SUITE 107
HIALEAH, FL 33014 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: P,VP () Delete
Name: ARIAS, ALEJANDRO
Address: 8275 W 12TH AVE SUITE 107
City-St-Zip: MIAMI, FL 33014

Title: S () Delete
Name: MORA, VIRGINIA P
Address: 1513 NW 159 LANE
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ALEJANDRO ARIAS

P

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date