

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000035185

FILED
May 14, 2008
Secretary of State

Entity Name: RISITOS DE ORO DAYCARE, INC.

Current Principal Place of Business:

5480 W 21 CT APT 202
HIALEAH, FL 33016

New Principal Place of Business:

22831 SW 88 PL
BLDING 15 APT 106
MIAMI, FL 33190

Current Mailing Address:

5480 W 21 CT APT 202
HIALEAH, FL 33016

New Mailing Address:

22831 SW 88 PL
BLDING 15 APT 106
MIAMI, FL 33190

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, YULIAM LOPEZ
5480 W 21 CT APT 202
HIALEAH, FL 33016 US

Name and Address of New Registered Agent:

LOPEZ GONZALEZ, YULIAM
22831 SW 88 PL
BLDING 15 APT 106
MIAMI, FL 33190 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: YULIAM LOPEZ GONZALEZ

05/14/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RODRIGUEZ, FLOREAL E
Address: 5480 W 21 CT APT 202
City-St-Zip: HIALEAH, FL 33016

Title: VP () Delete
Name: RODRIGUEZ, NOEL
Address: 5480 W 21 CT APT 202
City-St-Zip: HIALEAH, FL 33016

Title: D (X) Delete
Name: GONZALEZ, YULIAM LOPEZ
Address: 5480 W 21 CT APT 202
City-St-Zip: HIALEAH, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RODRIGUEZ, FLOREAL E
Address: 22831 SW 88 PL BLDING 15 APT 106
City-St-Zip: MIAMI, FL 33190

Title: VP (X) Change () Addition
Name: LOPEZ GONZALEZ, YULLIAM
Address: 22831 SW 88 PL BLDING 15 APT 106
City-St-Zip: MIAMI, FL 33190

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: FLOREAL E RODRIGUEZ

P

05/14/2008

Electronic Signature of Signing Officer or Director

Date