2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2009
Secretary of State

DOCUMENT# P94000087720

Entity Name: VILLA CARMEN, INC.

Current Principal Place of Business:

11011 S.W. 69 DRIVE
MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

11011 S.W. 69 DRIVE
MIAMI, FL 33173

New Mailing Address:

FEI Number: 65-0539524 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DOMINGUEZ, CARMEN
11011 S.W. 69 DRIVE
MIAMI, FL 33173 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:	VP	( ) Delete
Name:	SIXTO, EMILIO	
Address:	4000 S W 128TH AVE	
City-St-Zip:	MIAMI, FL 33175	
Title:	SD	( ) Delete
Name:	SIXTO, FELIPE	
Address:	12890 S.W. 26TH ST.	
City-St-Zip:	MIAMI, FL 33175	
Title:	VP	( ) Delete
Name:	SIXTO, ANDRES	
Address:	9630 SW 44TH ST	
City-St-Zip:	MIAMI, FL 33165	
Title:	TD	( ) Delete
Name:	CARMEN, DOMINGUEZ	
Address:	11011 SW 69TH DR	
City-St-Zip:	MIAMI, FL 33173	
Title:	VP	( ) Delete
Name:	SIXTO, TACY DE LA CAR	
Address:	903 OLD FIELD DR	
City-St-Zip:	BRANDON, FL 33511	
Title:	PD	( ) Delete
Name:	SIXTO, CARMEN	
Address:	2290 SW 6TH ST	
City-St-Zip:	MIAMI, FL 33125	

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:		
Title:	TD	(X) Change ( ) Addition
Name:	DOMINGUEZ, CARMEN C	
Address:	11011 SW 69TH DR	
City-St-Zip:	MIAMI, FL 33173	
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: CARMEN DOMINGUEZ TD 02/10/2009
Electronic Signature of Signing Officer or Director Date