2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 21, 2009
Secretary of State

DOCUMENT# V58064

Entity Name: LATIN POWER, INC.

Current Principal Place of Business:

1975 E. SUNRISE BLVD.
#527
FT. LAUDERDALE, FL 33304

New Principal Place of Business:

1975 E. SUNRISE BLVD.
#540
FT. LAUDERDALE, FL 33304

Current Mailing Address:

1975 E. SUNRISE BLVD.
#527
FT. LAUDERDALE, FL 33304

New Mailing Address:

1975 E. SUNRISE BLVD.
#540
FT. LAUDERDALE, FL 33304

FEI Number: 65-0442887 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VASQUEZ, ELAINE
1975 E SUNRISE BLVD
#527
FORT LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

VASQUEZ, ELAINE
2600 N.E. 9TH STREET
FORT LAUDERDALE, FL 33304 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: ELAINE VASQUEZ 06/21/2009
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: VASQUEZ, ERWIN M MD.
Address: 2600 N.E. 9TH ST.
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: VP ( ) Delete
Name: VASQUEZ, ELAINE
Address: 820 N.E. 26TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304

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: ELAINE VASQUEZ V.P. 06/21/2009
Electronic Signature of Signing Officer or Director Date