I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FRANCISCO MAILLO

Electronic Signature of Signing Officer/Director Detail

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0300002999

Entity Name: LA CASA DE MI PADRE, INC.

Current Principal Place of Business:

440 GEORGE COGGIN RD NEWNAN, GA 30265

Current Mailing Address:

440 GEORGE COGGIN RD NEWNAN, GA 30265

FEI Number: 51-0459793

Name and Address of Current Registered Agent:

MAILLO, MARIA 18210 SW 228 STREET MIAMI, FL 33170 US

Certificate of Status Desired: Yes

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
Officer/Director Detail :				
Title	Ρ	Title	V	
Name	MAILLO, FRANCISCO	Name	MAILLO, MARIA D	
Address	453 GEORGE COGGIN ROAD	Address	453 GEORGE COGGIN RD	
City-State-Zip:	NEWNAN GA 30265	City-State-Zip:	NEWNAN GA 30265	

PRESIDENTE

04/09/2013