

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710100

FILED
Jan 17, 2009
Secretary of State

Entity Name: INTERNATIONAL MEDICAL AND CULTURAL FOUNDATION, INC.

Current Principal Place of Business:

2109 N.E. 45TH STREET
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

3809 LA VISTA CIRCLE
#206
JACKSONVILLE, FL 32217

Current Mailing Address:

2109 N.E. 45TH STREET
FORT LAUDERDALE, FL 33308 US

New Mailing Address:

3809 LA VISTA CIRCLE
#206
JACKSONVILLE, FL 32217

FEI Number: 59-6178296

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ZUBERO, DAVID
2109 N.E. 45TH STREET
FORT LAUDERDALE, FL 33308 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ZUBERO, JOSE L
Address: 2109 N.E. 45TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: VD () Delete
Name: ZUBERO, DAVID L
Address: 2109 NE 45TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D () Delete
Name: ZUBERTO, DANIEL L
Address: 2109 NE 45TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D () Delete
Name: ZUBERO, JULIA L
Address: 2109 N.E. 45TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D () Delete
Name: POBLETE, LIDIA S
Address: T.C. VALENZUELA 7 ESC 2 PISO 1 J
City-St-Zip: ZARAGOZA, SPAIN, SP 50004 SP

Title: D () Delete
Name: LOPEZ, J. LUIS
Address: CALLE CHURRUCA 2 PISO 3, PUERTA 9
City-St-Zip: MADRID, SPAIN, SP 28004 SP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ZUBERO, JOSE L
Address: 3809 LA VISTA CIRCLE #206
City-St-Zip: JACKSONVILLE, FL 32217

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: () 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID ZUBERO

VD

01/17/2009

Electronic Signature of Signing Officer or Director

Date