

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006416

FILED
Jan 18, 2006
Secretary of State

Entity Name: PODER CHARITIES & EDUCATION FUND, INC.

Current Principal Place of Business:

7875 NW 15 ST
MIAMI, FL 33126

New Principal Place of Business:

7135 COLLINS AVE
416
MIAMI BEACH, FL 33141

Current Mailing Address:

7875 NW 15 ST
MIAMI, FL 33126

New Mailing Address:

7135 COLLINS AVE
416
MIAMI BEACH, FL 33141

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FILGUEIRA, GERMAN
7875 NW 15TH STREET
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

FILGUEIRA, GERMAN
7135 COLLINS AVE
615
MIAMI BEACH, FL 33141 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:

01/18/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: FILGUEIRA, GERMAN
Address: 7875 NW 15 ST
City-St-Zip: MIAMI, FL 33126

Title: D () Delete
Name: VARGAS, JANET O
Address: 7875 NW 15 ST
City-St-Zip: MIAMI, FL 33126

Title: D () Delete
Name: BOGUSKI-FILGUEIRA, LISA F
Address: 7875 NW 15 ST
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: FILGUEIRA, GERMAN
Address: 7135 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33141

Title: D (X) Change () Addition
Name: VARGAS, JANET O
Address: 7135 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33141

Title: D (X) Change () Addition
Name: BOGUSKI-FILGUEIRA, LISA F
Address: 7135 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33141

I hereby certify that the information supplied with this filing does not qualify for the 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: GERMAN FILGUEIRA

PSTD

01/18/2006

Electronic Signature of Signing Officer or Director

Date