2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2005 08:00 AM
Secretary of State

DOCUMENT # N03000006583

1. Entity Name
DANI FOUNDATION INC.

Principal Place of Business	Mailing Address
601 BRICKELL KEY DRIVE SUITE 201 MIAMI, FL 33131	601 BRICKELL KEY DRIVE SUITE 201 MIAMI, FL 33131

05232005 No Chg-NP CR2E037 (10/03)

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4. FEI Number
20-0169756
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GUTIERREZ, RENALDY J
601 BRICKELL KEY DRIVE
SUITE 201
MIAMI, FL 33131

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ALBIR, CARLOS E
STREET ADDRESS	6246 SW 102 STREET
CITY-ST-ZIP	MIAMI, FL 33156
TITLE	VD
NAME	ZUNIGA, FRANCISCO J
STREET ADDRESS	4671 SW 153 PLACE
CITY-ST-ZIP	MIAMI, FL 33185
TITLE	S
NAME	MARIN, ARIEL J
STREET ADDRESS	11825 SW 73 AVENUE
CITY-ST-ZIP	MIAMI, FL 33156
TITLE	TD
NAME	NAVARRO, XAVIER A
STREET ADDRESS	10720 SW 60 STREET
CITY-ST-ZIP	MIAMI, FL 33173
TITLE	AT
NAME	MAYORGA, OSCAR D
STREET ADDRESS	7531 SW 109 AVENUE
CITY-ST-ZIP	MIAMI, FL 33173
TITLE	AS
NAME	GUTIERREZ, RENALDY J
STREET ADDRESS	601 BRICKELL KEY DRIVE #201
CITY-ST-ZIP	MIAMI, FL 33131

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07/05/05-80025-014 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] Carlos E. Albir 6/30/05 305-694-8226
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #