

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007016

FILED
Jul 02, 2007
Secretary of State

Entity Name: MI SANGRE FOUNDATION CORPORATION

Current Principal Place of Business:

260 CRANDON BLVD. SUITE 53
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

260 CRANDON BLVD. SUITE 53
KEY BISCAYNE, FL 33149

New Mailing Address:

FEI Number: 20-5855508 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

ARISTIZABAL, JOSE L MANAGER
260 CRANDON BLVD SUITE 53
KEY BISCAYNE, FL 33149 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: JOSE ARISTIZABAL

07/02/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ARISTIZABAL, JUAN E
Address: 260 CRANDON BLVD. SUITE 53
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete
Name: ARISTIZABAL, JOSE L
Address: 260 CRANDON BLVD. SUITE 53
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete
Name: MARTINEZ, KAREN
Address: 260 CRANDON BLVD. SUITE 53
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete
Name: SANCHEZ, TATIANA
Address: 260 CRANDON BLVD. SUITE 53
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete
Name: GRAVIER, LEONARDO D
Address: 201 ALHAMBRA CIRCLE SUITE 901
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JOSE ARISTIZABAL

MR

07/02/2007

Electronic Signature of Signing Officer or Director

Date