NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # N93000001887

1. Corporation Name

THE ARELLANO FOUNDATION, INC.

Principal Place of Business
C/O GJ FERNANDEZ-QUINCOCES
TWO SOUTH BISCAYNE BLVD.. STE 3400
MIAMI FL 33131-1897

Mailing Address

TWO SOUTH BISCAYNE BLVD. SUITE 3400

SUITE 3400 MIAMI FL 33133

## FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90002 030 \*\*\*\*61.25



2.	Principal Place of Business 2a. Mailing Address					3. Date Incorporated or Qualifed					
21							04/27/1993		<del>- 1 1 -</del>		
	Suite, Apt. #, etc. Suite, Apt. #, etc.						FEI Number 65-0413902			lied For	
22							0070413902			Applicable	
23	City & State City & State				- 5	5. Certificate of Status Desired Fee Required					
	Zip	Zip Country Zip Cour				6. Election Campaign Financing \$5.00 May Be					
24	25 29 30					Trust Fund Contribution Added to Fees					
	9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
					81 Name	Name Valdes-Fauli Corporate Services Inc.					
VALDES-FAUL CORPORATE SERVICES INC					82 Street Address (P.O. Box Number is Not Acceptable)						
TWO SOUTH BISCAYNE BLVD					2 S. Biscayne Blvd.						
SUITE 3400; ONE BISCAYNE TOWER					83 Suite 3400						
								<del> </del>			
MIAMI FL 33131					84 City	Mia	mi	FL	85 Zip C 331	31	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered by											
	agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.										
SIGNATURE Raul E. Valdes Fauli, President February 1,1999											
	GNATONE	Signature, typed or printed name of registered agent a	and title if applicable. / (NOTE:	Registered A	igent signature r	required v	vhen reinstating)	DATE	DIDECTO	70 IN 42	
12		OFFICERS AND		13.		·	ADDITIONS/CHANGES TO C		Change	Addition	
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l١	REET ADDRESS	2 SOUTH BISCAYNE BLVD., STE.	. 3400	3.3 STF	REET ADDRESS		. Biscayne Blvd.,	Ste 3400	1	٠.	
	Y-ST-ZIP	MIAMI FL		3.4. CIT	Y-ST-ZIP	Mia	mi, Flori <u>da 33131</u>		_	·-	
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Į	REET ADDRESS	LANDMARK COLLEGE RIVER ROA	AD	4.3 STF	REET ADDRESS						
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NA	ME	GADDIS, GEOFFREY		5.2 NA	ME.						
]	REET ADORESS	LANDMARK COLLEGE RIVER ROA	AD	5.3 STI	REET ADDRESS						
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NA.		CHAMMAS, ANDRE		6.2 NA	ME	, ,	exander, Gary D.			,	
	REET ADDRESS	2150 CORAL WAY, STE. 7-B		6.3 STF	REET ADDRESS		l LeJeune Road, S	uite 300			
I		MIAMI FL		•	Y-ST-ZIP		al Gables Florid				
(CIT	Y-ST-ZIP	MINMITE .		5.7 511		<u>i COI</u>	ar cantes, tionio	<u>a</u>			

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GUATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR

iillermo Fernandez-Quincoces

2/1/99

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