

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008426

FILED
Mar 20, 2009
Secretary of State

Entity Name: JUNTOS FOUNDATION, INC.

Current Principal Place of Business:

4143 SW 74 COURT
SUITE E
MIAMI, FL 33155

New Principal Place of Business:

Current Mailing Address:

4143 SW 74 COURT
SUITE E
MIAMI, FL 33155

New Mailing Address:

FEI Number: 20-1850200

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE LA RUA, JUAN
4143 SW 74 COURT
SUITE E
MIAMI, FL 33155 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: P () Delete
Name: DE LA RUA, JUAN P
Address: 55 OCEAN LANE DRIVE APT. 4035
City-St-Zip: KEY BISCAYNE, FL 33149

Title: VP () Delete
Name: MENDEZ, MARIA
Address: 5080 SW 65 AVE
City-St-Zip: MIAMI, FL 33155

Title: VP () Delete
Name: DE LA RUA, SILVIA
Address: 55 OCEAN LANE DRIVE APT. 4035
City-St-Zip: KEY BISCAYNE, FL 33149

Title: DIR. () Delete
Name: LOPEZ, JAVIER A
Address: 2400 SW 27TH AVENUE, APT. 802
City-St-Zip: MIAMI, FL 33145

Title: DIR. () Delete
Name: MENDEZ, MICHAEL R
Address: 2400 SW 27TH AVENUE, APT. 802
City-St-Zip: MIAMI, FL 33145

Title: DIR. () Delete
Name: NICOLAS, JOSE
Address: 2201 SW 27 LANE
City-St-Zip: COCONUT GROVE, FL 33133

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:

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: JUAN DE LA RUA

PRES

03/20/2009

Electronic Signature of Signing Officer or Director

Date