

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003799

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: THE ALAE FOUNDATION, INC.

## Current Principal Place of Business:

1500 MIAMI CENTER, 201 S BISCAYNE BLVD  
MIAMI, FL 33131

## New Principal Place of Business:

SHUTTS & BOWEN LLP (C/O JCD)  
1500 MIAMI CENTER, 201 S BISCAYNE BLVD  
MIAMI, FL 33131

## Current Mailing Address:

1500 MIAMI CENTER, 201 S BISCAYNE BLVD  
MIAMI, FL 33131

## New Mailing Address:

SHUTTS & BOWEN LLP (C/O JCD)  
1500 MIAMI CENTER, 201 S BISCAYNE BLVD  
MIAMI, FL 33131

FEI Number: 20-4668464

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI  
201 SOUTH BISCAYNE BLVD  
SUITE 1600 (JCD)  
MIAMI, FL 33131 US

## Name and Address of New Registered Agent:

CORPORATION COMPANY OF MIAMI  
201 SOUTH BISCAYNE BLVD  
SUITE 1500 (JCD)  
MIAMI, FL 33131 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:

04/27/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: ARELLANO, ANA LAURA  
Address: 605 OCEAN DRIVE APT 5L  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D ( ) Delete  
Name: DE ARELLANO, JORGE  
Address: 35 SW 57TH AVE  
City-St-Zip: OCALA, FL 34474

Title: D ( ) Delete  
Name: FANJUL, MARIETTA  
Address: 605 OCEAN DR APT 5M  
City-St-Zip: KEY BISCAYNE, FL 33149

## 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:

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: ANA LAURA ARELLANO

D

04/27/2009

Electronic Signature of Signing Officer or Director

Date