

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 07, 2012
Secretary of State

DOCUMENT# N07000011271

Entity Name: THE SALOMON KOZOLCHYK YOUTH FOUNDATION, INC.**Current Principal Place of Business:**201 SOUTH BISCAYNE BOULEVARD
SUITE 800
MIAMI, FL 33131**New Principal Place of Business:****Current Mailing Address:**201 SOUTH BISCAYNE BOULEVARD
SUITE 800
MIAMI, FL 33131**New Mailing Address:****FEI Number:** 26-1536659**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LAW CENTER OF THE AMERICAS, LLC
201 SOUTH BISCAYNE BOULEVARD
SUITE 800
MIAMI, FL 33131 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: DPS
Name: KOZOLCHYK, BORIS
Address: 3991 194 TRAIL
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: DVT
Name: KOZOLCHYK, MIRTA
Address: 3991 194 TRAIL
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: D
Name: LUCAS, ALEXIS
Address: 201 S BISCAYNE BLVD, SUITE 800
City-St-Zip: MIAMI, FL 33131

Title: D
Name: RUSSO, SILVINA
Address: 201 S BISCAYNE BLVD, SUITE 800
City-St-Zip: MIAMI, FL 33131

I hereby 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 all other like empowered.

SIGNATURE: BORIS KOZOLCHYK

D

05/07/2012

Electronic Signature of Signing Officer or Director

Date