


**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 23, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 717762</b> 1. Entity Name FLORIDA INTERNATIONAL UNIVERSITY FOUNDATION, INC.	
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Principal Place of Business UNIVERSITY PARK CAMPUS MARC 531 MIAMI, FL 33199 US	Mailing Address UNIVERSITY PARK CAMPUS MARC 531 MIAMI, FL 33199 US
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01112006 No Chg-NP CR2E037 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 23-7047106	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  LIPMAN, HOWARD % FLORIDA INTERNATIONAL UNIVERSITY OFFICE OF LEGAL AFFAIRS, UNIVERSITY PARK MIAMI, FL 33199
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when renewing) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV MIGOYA, CARLOS A 200 SOUTH BISCAYNE BLVD MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SPAK, THEODORE 501 CALATRAVA COURT MIAMI, FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD DICKINSON, ROBERT 3655 NW 87 AVENUE MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KAHN, LAWRENCE S III 80 SW 8TH ST., STE 1870 MIAMI, FL 33130
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/27/06-80006-004 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 179, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Howard Lipman, Executive Director  1.18.06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #