2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 03, 2006
Secretary of State

DOCUMENT# 758712

Entity Name: ARANGO DESIGN FOUNDATION, INC.

Current Principal Place of Business:

3900 LOQUAT AVE.
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

3900 LOQUAT AVE.
MIAMI, FL 33135

New Mailing Address:

FEI Number: 59-2139450 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HAMPTON, MARK
3900 LOQUAT AVE.
MIAMI, FL 33135 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: S ( ) Delete
Name: MARTINEZ, MARICARMEN
Address: 3528 ROYAL PALM AVENUE
City-St-Zip: MIAMI, FL 33133

Title: TD ( ) Delete
Name: HAMPTON, MARK
Address: 3900 LOQUAT AVENUE
City-St-Zip: MIAMI, FL 33133

Title: D ( ) Delete
Name: ABBATE, ANTHONY J
Address: 1222 SE 1 ST FORT LAUD
City-St-Zip: FORT LAUDERDALE, FL 33303

Title: D ( ) Delete
Name: GONZALEZ, RENE
Address: 1571 PENNSYLVANIA AV APT 6
City-St-Zip: MIAMI BEACH, FL 33139

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: MARK HAMPTON TD 07/03/2006

Electronic Signature of Signing Officer or Director — Date