

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 25, 2005 8:00 am**  
**Secretary of State**

01-25-2005 90038 026 \*\*\*\*61.25

40005874



01102005 Chg-NP CR2E037 (10/03)

**DOCUMENT # 827767**

1. Entity Name  
IAPA PRESS INSTITUTE, INC.



Principal Place of Business  
1801 SW 3RD AVE  
8TH FL  
MIAMI, FL 33129

Mailing Address  
1801 SW 3RD AVE  
8TH FL  
MIAMI, FL 33129

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number  
13-1963541

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MUNOZ, JULIO E  
1801 SW 3RD AVE  
8TH FL  
MIAMI, FL 33129

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

**Make check payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

|                |                            |                                            |
|----------------|----------------------------|--------------------------------------------|
| TITLE          | P                          | <input checked="" type="checkbox"/> Delete |
| NAME           | KRAISELBURD, RAUL          |                                            |
| STREET ADDRESS | DIAGONAL 80 N 815/21       |                                            |
| CITY-ST-ZIP    | LA PLATA, ARGENTINA,       |                                            |
| TITLE          | S                          | <input checked="" type="checkbox"/> Delete |
| NAME           | FERRE, LUIS A              |                                            |
| STREET ADDRESS | REY RICARDO 392            |                                            |
| CITY-ST-ZIP    | GUAYNABO, PR 00969         |                                            |
| TITLE          | V                          | <input type="checkbox"/> Delete            |
| NAME           | BRUGMANN, BRUCE            |                                            |
| STREET ADDRESS | 135 MISSISSIPPI ST         |                                            |
| CITY-ST-ZIP    | SAN FRANCISCO, CA 2536     |                                            |
| TITLE          | T                          | <input checked="" type="checkbox"/> Delete |
| NAME           | ZUCOLILLO, ALDO            |                                            |
| STREET ADDRESS | YEGROS 745                 |                                            |
| CITY-ST-ZIP    | ASUNCION, PARAGUAY,        |                                            |
| TITLE          | V                          | <input checked="" type="checkbox"/> Delete |
| NAME           | ADAMS, DAVID               |                                            |
| STREET ADDRESS | 490 1ST AVE N, PO BOX 1121 |                                            |
| CITY-ST-ZIP    | ST PETERSBURG, FL 33731    |                                            |
| TITLE          | D                          | <input type="checkbox"/> Delete            |
| NAME           | MUNOZ, JULIO E             |                                            |
| STREET ADDRESS | 7100 SW 146TH ST           |                                            |
| CITY-ST-ZIP    | MIAMI, FL 33158            |                                            |

|                |                           |                                                                              |
|----------------|---------------------------|------------------------------------------------------------------------------|
| TITLE          | P                         | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Robert J Caldwell         |                                                                              |
| STREET ADDRESS | 13151 Old Sycamore Drive  |                                                                              |
| CITY-ST-ZIP    | San Diego, CA 92128       |                                                                              |
| TITLE          | P                         | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Jaime Mantilla            |                                                                              |
| STREET ADDRESS | Apartado 17-07-09069      |                                                                              |
| CITY-ST-ZIP    | Quito, Ecuador            |                                                                              |
| TITLE          | V                         | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Francisco Fascetto        |                                                                              |
| STREET ADDRESS | Diagonal 80 No. 815/21    |                                                                              |
| CITY-ST-ZIP    | La Plata, Argentina       |                                                                              |
| TITLE          | T                         | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Gustavo A Mohme           |                                                                              |
| STREET ADDRESS | Jr. Camana No. 320        |                                                                              |
| CITY-ST-ZIP    | Lima, Peru                |                                                                              |
| TITLE          | S                         | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Humberto Castello         |                                                                              |
| STREET ADDRESS | 2271 SW 20 Street         |                                                                              |
| CITY-ST-ZIP    | Miami, FL 33145           |                                                                              |
| TITLE          | V                         | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Roberto Rock              |                                                                              |
| STREET ADDRESS | Bucarelli # 8, Col Centro |                                                                              |
| CITY-ST-ZIP    | C.p. 06040 Mexico DF      |                                                                              |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Julio E. Munoz Executive Director**

**01-11-05 (305)634-2465**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #