## 2002 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Feb 07, 2002 8:00 am § Secretary of State DOCUMENT # N00000000220 VENEZUELA WITHOUT BOUNDARIES FOUNDATION, INC. 02-07-2002 90314 006 \*\*\*\*61.25 Principal Place of Business Mailing Address 201 S. BISCAYNE BOULEVARD 201 S. BISCAYNE BOULEVARD 34TH FLOOR 34TH FLOOR MIAMI FL 33131 MIAMI FL 33131 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0972537 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П **Fee Required** 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent William R. Middelthon, Jr. Street Address (P.O. Box Number is Not Acceptable) GARCIA-OLIVER, ANGEL M ESQ. FERRELL SCHULTZ CARTER & FERTEL, P.A. Biscayne Blrd., 201 SOUTH BISCAYNE BOULEVARD 34TH FLOOR **MIAMI FL 33131** Zip Code 3 ! 8. The above of hanging its registered office or registered agent, or both, in the state of Florida. ( SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make Check Pavable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITI F PD ☐ Delete TITLE ☐ Channe ☐ Addition FAJARDO, OSWAŁDO C NAME NAME STREET ADDRESS 201 S. BISCAYNE BOULEVARD 34TH FLOOR STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 CITY-ST-ZIP vstd TITLE ☐ Delete TITLE Addition ☐ Change GOMEZ. MIREYA B NAME NAME STREET ADDRESS 201 S. BISCAYNE BOULEVARD 34TH FLOOR STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition BLAVIA, ANTONIO NAME STREET ADDRESS 201 S. BISCAYNE BOULEVARD 34TH FLOOR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

I hereby certify that the information supplied with this fing 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 er 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 of the corporation or the receiver er trustee empower changed, or on an attachment with an address, with

CITY-ST-ZIP

SIGNATURE:

CITY-ST-7IP

1/22/02