## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000000935

FILED May 22, 2006 Secretary of State

Entity Name: JOSEFA PEREZ DE CASTANO KIDNEY FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 970 S.W. 1ST STREET 407 MIAMI, FL 33130 **New Mailing Address: Current Mailing Address:** 825 S.W. 28TH ROAD 970 S.W. 1ST STREET SUITES 407/408 MIAMI, FL 33129 MIAMI, FL 33130 FEI Number: 65-0992434 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) 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: Name and Address of New Registered Agent: PEREZ, MARIA C 825 S.W. 28TH ROAD MIAMI, FL 33129 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete PEREZ, MARIA C PEREZ. MARIA C PD Name: Name: 825 S.W. 28TH ROAD Address: 825 S.W. 28TH ROAD Address: City-St-Zip: MIAMI, FL 33129 City-St-Zip: MIAMI, FL 33129 US Title: VPD () Delete Title: (X) Change ( ) Addition PEREZ, JULIO A Name: CASAS, ZOILA VPD Name: Address: 3554 N.W. 12TH ST. Address: 1535 S.W 20TH STREET City-St-Zip: MIAMI, FL 33125 City-St-Zip: MIAMI, FL 33145 US Title: () Delete Title: (X) Change ( ) Addition APARICIO, ELOY P APARICIO, ELOY P TD Name: Name: 1171 S.W. 8TH ST. Address: Address: 1171 S.W. 8TH ST. City-St-Zip: MIAMI, FL 33130 City-St-Zip: MIAMI, FL 33130 US Title: () Delete Title: ( ) Change (X) Addition Name: Name: TOLL, MERCEDEZ D. 14940 S.W. 48TH AVENUE UNIT D Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33185 US Title: () Delete Title: ( ) Change (X) Addition ORTIZ, SARA C D. Name: Name: 9340 FONTAINEBLEU BLVD # 405 Address: Address: City-St-Zip: City-St-Zip: MIAMI FLORIDA, FL 33172 US

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: MARIA C. PEREZ PRES 05/22/2006