2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000007360

City-St-Zip:

MIAMI, FL 33129

Entity Name: AMERICAN FOUNDATION PRO DEMOCRACY INC.

FILED Apr 30, 2003 Secretary of State

New Principal Place of Business: Current Principal Place of Business: 101 SW 15 ROAD MIAMI, FL 33129 **Current Mailing Address: New Mailing Address:** 101 SW 15 ROAD MIAMI, FL 33129 FEI Number: 65-1447622 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LIMA, MARTHA 101 SW 15 ROAD MIAMI, FL 33129 US 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: () Delete () Change () Addition LLAMERA, EUGENIO Name: Name: Address: 642 S.W. 10TH AVENUE Address: City-St-Zip: MIAMI, FL 33130 City-St-Zip: Title: VD () Delete Title: () Change () Addition Name: LOLI, ORLANDO Name: Address: 848 BRICKELL AVE., #830 Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip: Title: () Delete Title: () Change () Addition AGUIRRE, LUIS Name: Name: Address: 101 S.W. 15 ROAD Address: City-St-Zip: MIAMI, FL 33129 City-St-Zip: Title: TD () Delete Title: () Change () Addition MENA, PEDRO D Name: Name: 16020 OPAL CREEK Address: Address: City-St-Zip: WESTON, FL 33331 City-St-Zip: Title: Title: DCEO () Delete () Change () Addition LIMA, MARTHA Name: Name: 101 S.W. 15 ROAD Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip:

SIGNATURE: MARTHA LIMA DCEO 04/30/2003