

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003511

FILED
Apr 30, 2004
Secretary of State

Entity Name: KALITALA FOUNDATION, INC.

Current Principal Place of Business:

C/O NATIONAL CORPORATE RESEARCH LTD., INC.
1406 HAYS ST., STE. #2
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

C/O NATIONAL CORPORATE RESEARCH LTD., INC.
1406 HAYS ST., STE. #2
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 39-1779503

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC.
103 N. MERIDIAN STREET
TALLAHASSEE, FL 323010000 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: D () Delete
Name: MARTIN, ENRIQUE
Address: P.O.BOX 13345
City-St-Zip: SANTURCELES, PR 00908

Title: D () Delete
Name: CANADAS, ESTHER
Address: CAPITAL E, 509 MASISON AVE, STE 602
City-St-Zip: NEW YORK, NY 10022

Title: D () Delete
Name: FONCILLAS, IGNACIO
Address: 200 PARK AVENUE, 47 FL
City-St-Zip: NEW YORK, FL 10166

Title: D () Delete
Name: SERRANO, RAFAEL
Address: 27 BERKELEY SQUARE
City-St-Zip: LONDON W1J6EL, UR,

Title: D () Delete
Name: ZUBILLAGA, ANTONIO D
Address: ROOM M-318 UNITED NATIONS, P.O. BOX 30030
City-St-Zip: NAIROBI 00100 KENYA,

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:

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 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.

SIGNATURE: LINA SRIVASTAVA

CEO

04/30/2004

Electronic Signature of Signing Officer or Director

Date