## FILED May 05, 2003 8:00 am Secretary of State 05-05-2003 90352 012 \*\*\*\*61.25

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N0100006951  1. Entity Name AMIGOS DEL PERU FOUNDATION, INC.									JJ-UJ-2	003 90	332 012	0	1.23	
Principal Place of Business 601 BRICKELL KEY DRIVE SUITE 705 MIAMI, FL 33131				Mailing Address 601 BRICKELL KEY DRIVE SUITE 705 MIANI, FL 33131										
2. Principal Place of Business I AVC				3. Mailing Address 1000 Bridled Ave										
Suite, Apt. #, etc. QDO				Suite, Apt. #, etc.					CHECK I	HERE IF N	AAKING C	HANGES		
City & Stat	*Mia	Cit	City & State Miomi,				4. FEI Number 65-1141790					Applied For Not Applicable		
zip 3	331	CountryUS	Zip	ડિયસ	Cou	intry U	5	5. Certificate of S	Status Des	ired	□ <b>\$£</b>	3.75 Add e Require	itional d	1
	6. Name	and Address of Current	72	7. Name and Ad						7				
DE LA PENA & BAJANDAS, LLP 601 BRICKELL KEY DRIVE						Name Rica (do Bajano Street Address (P.O. Box Number is Not Accept					, 7.2	4.		+
SUITE 705 MIAMI, FL			100	0 1	Bricke	<u> </u>	we	, Su	ite	700	1			
			City >	lia				FL	Zip Coo	<u>کی ۔</u>	1			
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 a the obligations of registered agent.														
SIGNATURE				Rec	arc	to I	3010	inda J		4	/30 b	3		
SIGNATURE	Signature, typed	or printed name of registered agent	ادرد از هلاا لهد		: Registere	i Agentsigna	ura laturat	swan reinstating)		—- <del></del>	DATE			
FILE NOW: FEE IS:\$61/25				Election Campaign Financing     Trust Fund Contribution.				\$5.00 May Be Added to Fees	·		Check F Departm			100 100 100 100 100 100 100 100 100 100
10.		OFFICERS AND DI	RECTORS		11.			ADDITIONS/CHANC	ES TO O	FICERS	AND DIREC	CTORS IN	10	֓֟֝֟֝֡֡֡֡֡֡֡
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Indicated of the cor	on this report poration or the	e Information supplied with t or supplemental report is se receiver or trustee emp schment with an address,	s true and a owered to e	accurate and that nexecute this report	ny signat as requir	ure shall h ed by Cha	ave the sapter 617	same legal effect as , Florida Statutes; ar	if made u	nder oath;	that I am	an officer	or director	
SIGNAT	URE: _	SIGNATURE AND TYPED OR	PRINTED NAM	ardo ba	ANC		Secr	chang 4	[[30]	03	305.	3770	809	