## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000000287

FILED Apr 27, 2006 Secretary of State

Entity Name: CARLOS ALBIZU UNIVERSITY FOUNDATION INC.

**Current Principal Place of Business: New Principal Place of Business:** 2173 NW 99TH AVENUE MIAMI, FL 33172 **Current Mailing Address: New Mailing Address:** 2173 NW 99TH AVENUE MIAMI, FL 33172 FEI Number: 32-0017813 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: MARIN, GUSTAVO B J.D. 2173 NW 99TH AVENUE MIAMI, FL 33172 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 RODRIGUEZ, MRS. TERESA A ALBIZU-RODRIGUEZ, MRS. TERESA Name: Name: 2173 NW 99TH AVENUE Address: 2173 NW 99TH AVENUE Address: MIAMI, FL 331722209 City-St-Zip: MIAMI, FL 331722209 City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete Name: YANES, MR. JUAN A Name: YANES, MR. JUAN A Address: 700 CORAL WAY SUITE #8 Address: 700 CORAL WAY SUITE #8 City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134 Title: () Delete Title: () Change () Addition MILIAN, EVARIST Name: Name: 141 ALMERIA AVE Address: Address: City-St-Zip: MIAMI, FL 33134 City-St-Zip: Title: ( ) Delete Title: () Change () Addition M Name: BOLANOS, MR. FRANK Name: 1450 NE 2ND AVE., SUITE 700 Address: Address: City-St-Zip: MIAMI, FL 33132 City-St-Zip: Title: () Delete Title: () Change () Addition LOPES, JORGE L Name: Name: 200 S BISCAYNE BLVD STE 4000 Address: Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip: Title: () Delete Title: () Change () Addition MASDIVAL, MR. RAUL Name: Name: Address: 201 ALHAMBRA CIRCLE, #1401 Address: CORAL GABLES, FL 33134 City-St-Zip: City-St-Zip:

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: TERESA ALBIZU-RODRIGUEZ S 04/27/2006