2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 08, 2004
Secretary of State

DOCUMENT# N02000004899

Entity Name: ASOCIACION AYUDA A UN NINO INC.

Current Principal Place of Business:

9980 CENTRAL PARK BLVD.
NORTH, SUITE 212
BOCA RATON, FL 33428

New Principal Place of Business:

Current Mailing Address:

9980 CENTRAL PARK BLVD.
NORTH, SUITE 212
BOCA RATON, FL 33428

New Mailing Address:

FEI Number: 98-0382408 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RONALD MONAHAN, RAORK
9980 CENTRAL PARK BLVD N STE 212
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

MONAHAN, ROARK R
9980 CENTRAL PARK BLVD-NORTH
BOCA RATON, FL 33428 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: ROARK R.MONAHAN 06/08/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: GARCIA, AIDA
Address: 9980 CENTRAL PARK BLVD. - NORTH, SUITE 212
City-St-Zip: BOCA RATON, FL 33428

Title: D ( ) Delete
Name: SCHOFFEL, IRMA
Address: 9980 CENTRAL PARK BLVD. - NORTH, SUITE 212
City-St-Zip: BOCA RATON, FL 33428

Title: D ( ) Delete
Name: POTTS, MARIA G
Address: 9980 CENTRAL PARK BLVD. - NORTH, SUITE 212
City-St-Zip: BOCA RATON, FL 33428

Title: D ( ) Delete
Name: DI MATTEO LEGGIO, GIOVINA
Address: 9980 CENTRAL PARK BLVD. - NORTH, SUITE 212
City-St-Zip: BOCA RATON, FL 33428

Title: D ( ) Delete
Name: TILLERO, KATTY
Address: 9980 CENTRAL PARK BLVD. - NORTH, SUITE 212
City-St-Zip: BOCA RATON, FL 33428

Title: D ( ) Delete
Name: CAMPOS, MARY
Address: 9980 CENTRAL PARK BLVD. - NORTH, SUITE 212
City-St-Zip: BOCA RATON, FL 33428

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:

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: ROARK R MONAHAN MR 06/08/2004
Electronic Signature of Signing Officer or Director Date