2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2007
Secretary of State

DOCUMENT# N02000005052

Entity Name: FUNDACION ENTRE NOSOTRAS, INC.

Current Principal Place of Business:

15112 SW 140 PL
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

15112 SW 140 PL
MIAMI, FL 33186

New Mailing Address:

FEI Number: 38-3651588 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BECERRA, MARIA M
15112 SW 140 PL
MIAMI, FL 33186 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: PD ( ) Delete
Name: BECERRA, MARIA M
Address: 15112 SW 140 PL
City-St-Zip: MIAMI, FL 33186

Title: VPD ( ) Delete
Name: MELISA, MUNIZ
Address: 15330 SW 72 ST # 12
City-St-Zip: MIAMI, FL 33193

Title: TD ( ) Delete
Name: CASTANO, MARTA P
Address: 12991 NW 1 ST APT 107
City-St-Zip: PEMBROKE PINES, FL 33028

Title: SD ( ) Delete
Name: MIRIAM, MARTINEZ
Address: 14001 SW 199 AVE
City-St-Zip: MIAMI, FL 33196

Title: D ( ) Delete
Name: LORRAINE, CASAYA
Address: 15112 SW 140 PL
City-St-Zip: MIAMI, FL 33186

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 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: MARIA MERCEDES BECERRA PD 01/09/2007

Electronic Signature of Signing Officer or Director — Date