2003 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003
Secretary of State

DOCUMENT# N02000005463

Entity Name: NICARAGUAN RELIEF FUND, INC.

Current Principal Place of Business:

12681 SW 78 ST
MIAMI, FL 33183

New Principal Place of Business:

Current Mailing Address:

12681 SW 78 ST
MIAMI, FL 33183

New Mailing Address:

FEI Number: 73-1651792 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KELLY, ANDREAS M
444 BRICKELL AVE STE 300
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

KELLY, ANDREAS M
DEMAHY LABRADOR & DRAKE
2333 PONCE DE LEON BLVD #550
CORAL GABLES, FL 33134 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: ANDREAS M. KELLY 05/02/2003
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: ARGUELLO, MNSGR FEDERICO
Address: 12681 SW 78 ST
City-St-Zip: MIAMI, FL 33183

Title: DV ( ) Delete
Name: PEREZ ABAUNZA, SANTIAGO
Address: 12681 SW 78 ST
City-St-Zip: MIAMI, FL 33183

Title: DS ( ) Delete
Name: ABAUNZA, DR RAMIRO
Address: 12681 SW 78 ST
City-St-Zip: MIAMI, FL 33183

Title: DT ( ) Delete
Name: PORTA, ZENOBIA
Address: 12681 SW 78 ST
City-St-Zip: MIAMI, FL 33183

Title: DAT ( ) Delete
Name: MUNEZ, DR NICOLAS
Address: 12681 SW 78 ST
City-St-Zip: MIAMI, FL 33183

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: FEDERICO ARGUELLO P 05/02/2003
Electronic Signature of Signing Officer or Director Date