2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007
Secretary of State

DOCUMENT# N02000007528

Entity Name: LENDING HANDS BOLIVIAN AMERICAN FOUNDATION, INC.

Current Principal Place of Business:

9311 SW 58 TERRACE
MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

9311 SW 58 TERRACE
MIAMI, FL 33173

New Mailing Address:

FEI Number: 46-0504713 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PENAYLILLO, MADELA
9311 S.W. 58 TERRACE
MIAMI, FL 33173 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: P/D ( ) Delete
Name: BORDA, JOSE
Address: 7920 SW 117TH ST
City-St-Zip: MIAMI, FL 33186

Title: P/D ( ) Delete
Name: BRTHIN, MIGUEL
Address: 4676 NW 60 LANE
City-St-Zip: CORAL SPRINGS, FL 33067

Title: D ( ) Delete
Name: BOYD, MARIA T
Address: 1969 SOUTH LANDING WAY
City-St-Zip: WESTON, FL 3332

Title: D ( ) Delete
Name: GUZMAN, ELIZABETH
Address: 5420 SW 152 PL CIR
City-St-Zip: MIAMI, FL 33185

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: P/D (X) Change ( ) Addition
Name: BERTHIN, MIGUEL
Address: 4676 NW 60 LANE
City-St-Zip: CORAL SPRINGS, FL 33067

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 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: JOSE BORDA P/D 04/25/2007

Electronic Signature of Signing Officer or Director — Date