

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001222

FILED  
Mar 27, 2006  
Secretary of State

Entity Name: INFANTIS SANUM FOUNDATION, INC.

## Current Principal Place of Business:

318 INDIAN TRACE #333  
WESTON, FL 33326 US

## New Principal Place of Business:

## Current Mailing Address:

318 INDIAN TRACE #333  
WESTON, FL 33326 US

## New Mailing Address:

FEI Number: 26-0063003

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CESAR MARTINEZ  
18331 PINES BLVD  
SUITE 223  
PEMBROKE PINES, FL 33029 US

## Name and Address of New Registered Agent:

MARTINEZ, CESAR  
318 INDIAN TRACE #333  
WESTON, FL 33326 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: CESAR MARTINEZ

03/27/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: GARCIA OLANO, WILLIAM  
Address: 18331 PINES BLVD.SUITE 223  
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: DT ( ) Delete  
Name: MORA MORA, OLGA LUCIA  
Address: 18331 PINES BLVD.SUITE 223  
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: DV ( ) Delete  
Name: DIAZ, HILDEBRANO  
Address: 18331 PINES BLVD.SUITE 223  
City-St-Zip: PEMBROKE PINES, FL 33029 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: GARCIA OLANO, WILLIAM  
Address: 318 INDIAN TRACE #333  
City-St-Zip: WESTON, FL 33326 US

Title: DT (X) Change ( ) Addition  
Name: MORA MORA, OLGA LUCIA  
Address: 318 INDIAN TRACE #333  
City-St-Zip: WESTON, FL 33326 US

Title: DV (X) Change ( ) Addition  
Name: MARTINEZ, CESAR  
Address: 318 INDIAN TRACE #333  
City-St-Zip: WESTON, FL 33326 US

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: WILLIAM GARCIA OLANO

MR

03/27/2006

Electronic Signature of Signing Officer or Director

Date