2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2009
Secretary of State

DOCUMENT# N03000002585

Entity Name: FUNDACION POR TI COLOMBIA CORP

Current Principal Place of Business:

3851 NW 110 AV
S
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

Current Mailing Address:

3851 NW 110 AV
S
CORAL SPRINGS, FL 33065 US

New Mailing Address:

FEI Number: 83-0351989 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TORRES, GUSTAVO A
3851 NW 110 AV
S
CORAL SPRINGS, FL 33065 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	( ) Delete
Name:	TORRES, GUSTAVO A P	
Address:	3851 NW 110 AVE.	
City-St-Zip:	CORAL SPRINGS, FL 33065 US	
Title:	TD	( ) Delete
Name:	TORRES, GLORIA TD	
Address:	3851 NW 110 AV	
City-St-Zip:	CORAL SPRINGS, FL 33065 US	
Title:	VT	( ) Delete
Name:	APREA, MELINA VT	
Address:	2449 SW ANGUS ST	
City-St-Zip:	PORT ST LUCIE, FL 34953 US	
Title:	S	( ) Delete
Name:	VIDAL, GLADYS S	
Address:	5701 SW 34TH AVE.	
City-St-Zip:	OCALA, FL 34474 US	
Title:	VS	( ) Delete
Name:	MCFAZLAND, DEE VS	
Address:	1246 NW 45TH ST.	
City-St-Zip:	DEERFIELD BEACH, FL 33064 US	
Title:	D	( ) Delete
Name:	CANCINO, GERARDO D	
Address:	5150 CLUB CIRCLE U 106	
City-St-Zip:	BOCA RATON, FL 33487 US	

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 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: GUSTAVO A TORRES P 01/19/2009

Electronic Signature of Signing Officer or Director — Date