## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # N03000006583

1. Entity Name

DANÍ FOUNDATION INC.



FILED May 12, 2006 08:00 Al Secretary of State

Principal Place of Business

**601 BRICKELL KEY DRIVE** 

SUITE 201 MIAMI, FL 33131 Mailing Address

601 BRICKELL KEY DRIVE

SUITE 201 MIAMI, FL 33131



## DO NOT WRITE IN THIS SPACE

02032006 No Chg-NP

CR2E037 (11/05)

4. FEI Number 20-0169756 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GUTIERREZ, RENALDY J 601 BRICKELL KEY DRIVE SUITE 201 MIAMI, FL 33131

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

<ol> <li>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. I am familiar with, and accept the obligations of registered agent.</li> </ol>						
SIGNATURE_	Signature, typed or printed name of registered agent and title if a	policable. (NOTE, Registered Ag	ent signature	e required when reinstaling)	DATE	
	Filing Fee is \$61.25 Due by May 1, 2006	Election Campaign Financin Trust Fund Contribution.	ġ .	\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ALBIR, CARLOS E 6246 SW 102 STREET MIAMI, FL 33156				U00000564330 05/20/06-80053-020 61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ZUNIGA, FRANCISCO J 4671 SW 153 PLACE MIAMI, FL 33185					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MARIN, ARIEL J 11825 SW 73 AVENUE MIAMI, FL 33156			DO NOT WRITE		
TITLE NAME STREET ADDRESS GITY-ST-ZIP	TD NAVARRO, XAVIER A 10720 SW 60 STREET MIAMI, FL 33173			IN	IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT MAYORGA, OSCAR D 7531 SW 109 AVENUE MIAMI, FL 33173					
DILE NAME STREET ADDRESS CITY-ST-ZIP	AS GUTIERREZ, RENALDY J 601 BRICKELL KEY DRIVE #201 MIAMI, FL 33131					
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						