

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007561

FILED  
Jul 10, 2007  
Secretary of State

**Entity Name:** UNITED SENIORS OF AMERICA FOUNDATION, CORP.

**Current Principal Place of Business:**

2141 SW 1ST STREET  
SUITE 204  
MIAMI, FL 33135

**New Principal Place of Business:**

**Current Mailing Address:**

2141 SW 1ST STREET  
SUITE 204  
MIAMI, FL 33135

**New Mailing Address:**

**FEI Number:** 05-0588318      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

RAMOS, JOSE J  
14835 SW 168 TERRACE  
MIAMI, FL 33187 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: MR ( ) Delete  
Name: JOSE, RAMOS J PRES  
Address: 14835 SW 168 TERRACE  
City-St-Zip: MIAMI, FL 33187 US

Title: MR ( ) Delete  
Name: POTESTAD, ARTURO D/V  
Address: 8231 NW 8 STREET # 314  
City-St-Zip: MIAMI, FL 33126 US

Title: MRS ( ) Delete  
Name: TRAVIESO, RAQUEL D/S  
Address: 165 SW 49 AVENUE  
City-St-Zip: MIAMI, FL 33134 US

Title: MR ( ) Delete  
Name: TORRES, HECTOR A C/T/D  
Address: 524 NW 1ST STREET # 1401  
City-St-Zip: MIAMI, FL 33128

Title: MRS ( ) Delete  
Name: MERCADO, ENITH D/V  
Address: 901 SW 37 AVENUE # 45  
City-St-Zip: MIAMI, FL 33135 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:

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 J. RAMOS

MR

07/10/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date