2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008187

Entity Name: THE ORTIZ GURDIAN FOUNDATION, INC.

FILED Jul 21, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3191 CORAL WAY SUITE 801 MIAMI, FL 33145 **Current Mailing Address: New Mailing Address:** 3191 CORAL WAY SUITE 801 MIAMI, FL 33145 FEI Number: 20-0426877 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WATTS-FITZGERALD, ABIGAIL C CORPORATION SERVICE COMPANY 1111 BRICKELL AVENUE SUITE 2500 1201 HAYS STREET TALLAHASSEE, FL 32301 MIAMI, FL 33131 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: DEBORAH D. SKIPPER 07/21/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change (X) Addition ORTIZ DE MARTINEZ, CARLA Name: Name: Address: Address: 3191 CORAL WAY SUITE 801 City-St-Zip: City-St-Zip: MIAMI, FL 33145 US Title: Title: () Change (X) Addition () Delete ALONSO, FERNANDO Name: Name: Address: Address: 3191 CORAL WAY SUITE 801 City-St-Zip: City-St-Zip: MIAMI, FL 33145 US Title: () Delete Title: () Change (X) Addition MENDIETA, URIEL Name: Name: 3191 CORAL WAY SUITE 801 Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33145 US Title: () Delete Title: () Change (X) Addition CAMPOS RAMIREZ, TERESA Name: Name: 3191 CORAL WAY SUITE 801 Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33145 US Title: () Delete Title: () Change (X) Addition VALDES-FAULI, DORA Name: Name: 3191 CORAL WAY SUITE 801 Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33145 US Title: () Delete Title: () Change (X) Addition ORTIZ GURDIAN, PATRICIA Name: Name: Address: Address: 3191 CORAL WAY SUITE 801 MIAMI, FL 33145 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CARLA ORTIZ DE MARTINEZ ED 07/21/2004