2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

05-04-2006 90513 001 *1,411.25
N03000009081

FILED
06 MAY 26 AM 8:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03142006 Chg-NP CR2E037 (11/05)

DOCUMENT # N03000009081

1. Entity Name
OM FOUNDATION, INC.

Principal Place of Business	Mailing Address
1116 S DOUGLAS RD 6 CORAL SPRINGS, FL 33136	1116 S DOUGLAS RD 6 CORAL SPRINGS, FL 33136

2. Principal Place of Business	3. Mailing Address
1114 South Douglas Rd.	1114 South Douglas Rd.
Suite, Apt. #, etc. Suite 6	Suite, Apt. #, etc. Suite 6
City & State Coral Gables, Florida	City & State Coral Gables, Florida
Zip: 33134 Country: USA	Zip: 33134 Country: USA

4. FEI Number: 20-0318828 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
AGRAMUNT, LUIS 1116 S DOUGLAS RD 6 CORAL GABLES, FL 33136	Name Street Address (P.O. Box Number is Not Acceptable) 1114 South Douglas Rd., Suite 6 City: Coral Gables **FL** Zip Code: 33134

8. 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.

SIGNATURE: LUIS AGRAMUNT 04/15/2006
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GUERRA, JOSE 1116 S DOUGLAS RD #6 CORAL GABLES, FL 33136	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 1114 South Douglas Rd., Suite 6 Coral Gables, Florida 33134
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DE GOYENECHE, ALFONSO 1116 S DOUGLAS RD #6 CORAL GABLES, FL 33136	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 1114 South Douglas Rd., Suite 6 Coral Gables, Florida 33134
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DE LA PUENTE, PILAR 1116 S DOUGLAS RD #6 CORAL GABLES, FL 33136	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 1114 South Douglas Rd., Suite 6 Coral Gables, Florida 33134
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CASTRO, ALFONSO 1116 S DOUGLAS RD #6 CORAL GABLES, FL 33136	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 1114 South Douglas Rd., Suite 6 Coral Gables, Florida 33134
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D QUIROS, JORGE 1116 S DOUGLAS RD #6 CORAL SPRINGS, FL 33136	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 1114 South Douglas Rd., Suite 6 Coral Gables, Florida 33134
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	$95/26	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSE GUERRA (POD) 04/15/2006 (305)668-3027
SIGNATURE AND TYPED OR PRINTED NAME OF RECORD OFFICER OR DIRECTOR — Date — Daytime Phone #