

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009081

Entity Name: OM FOUNDATION, INC.

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

2135 BAY DRIVE
SUITE 2
MIAMI BEACH, FL 33141

New Principal Place of Business:

Current Mailing Address:

2135 BAY DRIVE
SUITE 2
MIAMI BEACH, FL 33141

New Mailing Address:

FEI Number: 20-0318828

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGRAMUNT, LUIS
1101 BRICKELL AVENUE
SUITE 801
MIAMI, FL 33141 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: D () Delete
Name: GUERRA, JOSE
Address: 1101 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: DE GOYENECHE, ALFONSO
Address: 1101 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: DE LA PUENTE, PILAR
Address: 1101 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: CASTRO, ALFONSO
Address: 1101 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: QUIROS, JORGE
Address: 1101 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ESTRADA FERNANDEZ, LUIS
Address: 1101 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: D (X) Change () Addition
Name: CASTRO DE LA MONTAÑA, ANTONIO A
Address: 1101 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: D (X) Change () Addition
Name: CASTRILLON TRISTAN, FERNANDO
Address: 1101 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

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 GUERRA

D

04/21/2009

Electronic Signature of Signing Officer or Director

Date