


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 16, 2007 08:00 AM
Secretary of State

| | |
|--|---|
| DOCUMENT # N04000000311 1. Entity Name FUNDACION ENCESTANDO UNA SONRISA, INC. |  |
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|--|--|
| Principal Place of Business 7270 NW 12 STREET SUITE 680 MIAMI, FL | Mailing Address 7270 NW 12 STREET SUITE 680 MIAMI, FL |
|--|--|

DO NOT WRITE IN THIS SPACE



01042007 No Chg-NP CR2E037 (4/06)

| | |
|--|-----------------------------------|
| 4. FEI Number 20-0593063 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

ALONSO, DOMINGO
300 SEVILLA AVE
SUITE 201
CORAL GABLES, FL 33134

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IN THIS SPACE**

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 _____
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, 2007**

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

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D GARTLAN, PAUL 1117 BELLA VISTA AVENUE CORAL GABLES, FL 33156 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D PACHECO, DOMINADOR 7230 SW 130 AVENUE MIAMI, FL 33183 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D ASECIO, JORGE 15405 SW 74 CT MIAMI, FL 33157 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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01/17/07-80037-018 158.75

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IN THIS SPACE**

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: Paul V. Gartlan Paul V. Gartlan 9-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #