

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001533

FILED
Feb 23, 2009
Secretary of State

Entity Name: FBZ ARCHIVOS FOUNDATION, INC.

Current Principal Place of Business:

535 VITTORIO AVE
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

535 VITTORIO AVE
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 20-0803130

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WELLS, THOMAS O PA
540 BILTMORE WAY
CORAL GABLES, FL 33134 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: PS () Delete
Name: BATISTA, MARIA T
Address: 6008 LEONARDO STREET
City-St-Zip: CORAL GABLES, FL 33146

Title: VT () Delete
Name: BATISTA, ROBERTO F
Address: 2409 CHESAPEAKE CIR
City-St-Zip: WEST PALM BEACH, FL 33409

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VT (X) Change () Addition
Name: CANTERO, RAOUL G
Address: 711 MAJORCA AVE.
City-St-Zip: CORAL GABLES, FL 33134

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: MARIA TERESA BATISTA

PRES

02/23/2009

Electronic Signature of Signing Officer or Director

Date