

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000005050

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

**Entity Name:** VENEZUELA AWARENESS FOUNDATION INC

**Current Principal Place of Business:**

814 NW 126TH COURT  
MIAMI, FL 33182

**New Principal Place of Business:**

**Current Mailing Address:**

814 NW 126TH COURT  
MIAMI, FL 33182

**New Mailing Address:**

**FEI Number:** 55-0870420

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ANDRADE, TADEO  
814 NW 126 CT.  
MIAMI, FL 33182 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:** VS  
**Name:** TEIJEIRO, JOSE A  
**Address:** 3100 SW 149 AVENUE  
**City-St-Zip:** MIAMI, FL 33185 US

**Title:** P  
**Name:** ANDRADE, TADEO Y  
**Address:** 814 NW 126TH COURT  
**City-St-Zip:** MIAMI, FL 33182 US

**Title:** T  
**Name:** MARIN, HAYDE  
**Address:** 3910 SW 4 STREET  
**City-St-Zip:** MIAMI, FL 33134 US

**Title:** S  
**Name:** CONTRERAS, VIRGINIA  
**Address:** 21907 IVY L EAF DR  
**City-St-Zip:** BOYDS, MA 20841 US

**Title:** VT  
**Name:** FISCHER, ELENA  
**Address:** 10253 NW 9 ST. CIRCLE, #507  
**City-St-Zip:** MIAMI, FL 33172 US

I hereby 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 all other like empowered.

**SIGNATURE:** TADEO ANDRADE

P

04/29/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date