

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005232

FILED  
Feb 14, 2008  
Secretary of State

**Entity Name:** FUNDACION EDUCATIVA CARLOS M. CASTANEDA, INC.

**Current Principal Place of Business:**

1925 BRICKELL AVENUE  
APT. D-1108  
MIAMI, FL 33129

**New Principal Place of Business:**

**Current Mailing Address:**

1925 BRICKELL AVENUE  
APT. D-1108  
MIAMI, FL 33129

**New Mailing Address:**

**FEI Number:** 20-1367155      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CASTANEDA, LILLIAN  
1925 BRICKELL AVENUE  
APT. D-1108  
MIAMI, FL 33129 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: LEAL, GLORIA  
Address: 1280 S. ALHAMBRA CIR., 1308  
City-St-Zip: CORAL GABLES, FL 33149

Title: V ( ) Delete  
Name: CASTANEDA, AILEEN  
Address: 59 KINGS COURT APT. 903  
City-St-Zip: SAN JUAN, PR 00911

Title: D ( ) Delete  
Name: CASTANEDA, EDUARDO  
Address: B-18 SAN IGNACIO ST., SAN PEDRO ESTATES  
City-St-Zip: CAGUAS, PR 00725

Title: D ( ) Delete  
Name: CASTANEDA, EMILY  
Address: 2904 NORWICH DRIVE WEST  
City-St-Zip: BRADENTON, FL 34205

Title: P ( ) Delete  
Name: CASTANEDA, LILLIAN  
Address: 1925 BRICKELL AVE. D-1108  
City-St-Zip: MIAMI, FL 33129

Title: S ( ) Delete  
Name: CASTANEDA, TANYA  
Address: 40 S. PROSPECT DRIVE  
City-St-Zip: CORAL GABLES, FL 33133

**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: HERNANDEZ-ABREU, LUIS  
Address: 10271 SW 72 STREET, STE. D-106  
City-St-Zip: MIAMI, FL 33173

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

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

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

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: LILLIAN CASTANEDA

P

02/14/2008

Electronic Signature of Signing Officer or Director

Date