

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jun 09, 2008 8:00 am**  
**Secretary of State**

06-09-2008 90001 044 \*\*\*\*66.25

**DOCUMENT # N04000006497**

1. Entity Name  
**ALMENAR OTERO FOUNDATION, INC.**



Principal Place of Business  
**16475 GOLF CLUB RD  
APT 106  
WESTON, FL 33326-1674 US**

Mailing Address  
**16475 GOLF CLUB RD  
APT 106  
WESTON, FL 33326-1674 US**



05312008 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**20-1450549**

Applied For  
Not Applicable

5. Certificate of Status Required ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST  
4TH FLOOR  
MIAMI, FL 33145**

**DO NOT WRITE  
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 of registered agent, officer or director (print name and title)

Signature of filer (print name and title)

DATE

**Filing Fee is \$61.25  
Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution ☒

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

NAME  
**PTS  
OTERO, CARLOS A**  
STREET ADDRESS  
**16475 GOLF CLUB RD, APT. 106**  
CITY, ST, ZIP  
**WESTON, FL 333261674**

NAME  
**VD  
DELGADILLO, HENRY**  
STREET ADDRESS  
**16475 GOLF CLUB RD, APT. 106**  
CITY, ST, ZIP  
**WESTON, FL 333261674**

NAME  
**VSD  
SALCEDO, MARITZA**  
STREET ADDRESS  
**16475 GOLF CLUB RD, APT. 106**  
CITY, ST, ZIP  
**WESTON, FL 333261674**

NAME  
STREET ADDRESS  
CITY, ST, ZIP

NAME  
STREET ADDRESS  
CITY, ST, ZIP

NAME  
STREET ADDRESS  
CITY, ST, ZIP

**DO NOT WRITE  
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 affidavit with an address, with all other like empowered.

**SIGNATURE:**

*Carlos Almenar Otero*

**CARLOS ALMENAR OTERO**

**5.30.08**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13-01

Revised 6-1-08