

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007549

FILED  
Apr 12, 2008  
Secretary of State

Entity Name: FUNDACION SUR FUTURO, INC.

## Current Principal Place of Business:

283 CATALONIA AVE 2ND FLOOR  
CORAL GABLES, FL 33134

## New Principal Place of Business:

## Current Mailing Address:

283 CATALONIA AVE 2ND FLOOR  
CORAL GABLES, FL 33134

## New Mailing Address:

FEI Number: 54-2158511

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MIAMI CORPORATE SYSTEMS, INC.  
283 CATALONIA AVE 2ND FLOOR  
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: D ( ) Delete  
Name: GRULLON, MELBA S  
Address: 808 BRICKELL KEY DR APT 701  
City-St-Zip: MIAMI, FL 33132

Title: D ( ) Delete  
Name: ORTIZ, BOLIVAR B  
Address: PLAZA INTERCARIBE AVE LOPE DE VEGA  
City-St-Zip: SANTO DOMINGO DOM REP,

Title: D ( ) Delete  
Name: MAZARA, VIOLETA  
Address: CANCELLERIA AVENCIA INDEPENDENCIA  
City-St-Zip: SANTO DOMINGO DOM REP,

Title: D ( ) Delete  
Name: DEFILLO, DAMARIS  
Address: AVENIDA DE LOS PROCERES SANTO DOMINGO  
City-St-Zip: DOM REP,

Title: D ( ) Delete  
Name: KALAR, ZOLLA D  
Address: UNICENTRO PLAZA 3ER NIVEL  
City-St-Zip: SANTO DOMINGO DOM REP,

Title: D ( ) Delete  
Name: SUERO, FEDERICO  
Address: AVENIDA MAXIMO GOMEZ  
City-St-Zip: SANTO DOMINGO DOM REP,

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: GRULLON, MELBA S  
Address: 2627 S. BAYSHORE DR APT 2201  
City-St-Zip: MIAMI, FL 33133

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

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: MELBA GRULLON

D

04/12/2008

Electronic Signature of Signing Officer or Director

Date