# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 20, 2009**
**Secretary of State**

DOCUMENT# N04000008426

**Entity Name:** JUNTOS FOUNDATION, INC.

**Current Principal Place of Business:**

4143 SW 74 COURT
SUITE E
MIAMI, FL 33155

**New Principal Place of Business:**

**Current Mailing Address:**

4143 SW 74 COURT
SUITE E
MIAMI, FL 33155

**New Mailing Address:**

**FEI Number: 20-1850200** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

DE LA RUA, JUAN
4143 SW 74 COURT
SUITE E
MIAMI, FL 33155 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: | P | ( ) Delete |
| Name: | DE LA RUA, JUAN P | |
| Address: | 55 OCEAN LANE DRIVE APT. 4035 | |
| City-St-Zip: | KEY BISCAYNE, FL 33149 | |
| Title: | VP | ( ) Delete |
| Name: | MENDEZ, MARIA | |
| Address: | 5080 SW 65 AVE | |
| City-St-Zip: | MIAMI, FL 33155 | |
| Title: | VP | ( ) Delete |
| Name: | DE LA RUA, SILVIA | |
| Address: | 55 OCEAN LANE DRIVE APT. 4035 | |
| City-St-Zip: | KEY BISCAYNE, FL 33149 | |
| Title: | DIR. | ( ) Delete |
| Name: | LOPEZ, JAVIER A | |
| Address: | 2400 SW 27TH AVENUE, APT. 802 | |
| City-St-Zip: | MIAMI, FL 33145 | |
| Title: | DIR. | ( ) Delete |
| Name: | MENDEZ, MICHAEL R | |
| Address: | 2400 SW 27TH AVENUE, APT. 802 | |
| City-St-Zip: | MIAMI, FL 33145 | |
| Title: | DIR. | ( ) Delete |
| Name: | NICOLAS, JOSE | |
| Address: | 2201 SW 27 LANE | |
| City-St-Zip: | COCONUT GROVE, 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: | ( ) 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: JUAN DE LA RUA PRES 03/20/2009

Electronic Signature of Signing Officer or Director — Date