

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003841

FILED  
Aug 03, 2006  
Secretary of State

Entity Name: FUNDACION SAM MIGUEL, INC.

**Current Principal Place of Business:**

1345 ALHAMBRA DRIVE  
FORT MYERS, FL 33901

**New Principal Place of Business:**

**Current Mailing Address:**

1345 ALHAMBRA DRIVE  
FORT MYERS, FL 33901

**New Mailing Address:**

FEI Number: 20-3615911      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

RODRIGUEZ, MIGUEL A  
1345 ALHAMBRA DRIVE  
FORT MYERS, FL 33901      US

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,D      ( ) Delete  
Name: RODRIGUEZ, MIGUEL A  
Address: 1345 ALHAMBRA DRIVE  
City-St-Zip: FORT MYERS, FL 33901

Title: T,D      ( ) Delete  
Name: MORALES, FRANCIA  
Address: 2342 WOODLIAD BOULEVARD  
City-St-Zip: FORT MYERS, FL 33907

Title: S,D      ( ) Delete  
Name: SANCHEZ, RUBIELA  
Address: 204 NE 23RD PLACE  
City-St-Zip: CAPE CORAL, FL 33903

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: MIGUEL RODRIGUEZ

P.D.

08/03/2006

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

\_\_\_\_\_  
Date