2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011986

Title:

Title:

Name:

Address: City-St-Zip:

Name:

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City-St-Zip:

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10247 SW 24 STREET #D-276

RODRIGUEZ, ÉDUARDO PR

1270 W. 42ND STREET #204

SALGADO, JAIME R

HIALEAH, FL 33012

MIAMI, FL 33165

Entity Name: FUNDACION QUIVICAN, INC.

FILED May 11, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
2145 MALIBU LAKES CIRCLE		3210 VALENCIA DR	
#1814 NAPLES, FL 34119		NAPLES, FL 34120	
Current Mailing Address:		New Mailing Address:	
2145 MALIBU LAKES CIRCLE #1814 NAPLES, FL 34119		3210 VALENCIA DR NAPLES, FL 34120	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive th		nber Not Applicable () Certificate of Status Desired () he prior notice. Name and Address of New Registered Agent:	
FERNANDEZ, NESTOR 2145 MALIBU LAKES CIRCLE #1814 NAPLES, FL 34119 US		FERNANDEZ, NESTOR 3210 VALENCIA DR NAPLES, FL 34120 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: NESTOR FERNANDEZ		05/11/2007	
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete FERNANDEZ, NESTOR 2145 MALIBU LAKES CIRCLE #1814 NAPLES, FL 34119	Title: PD (X) Chan Name: FERNANDEZ, NESTO Address: 3210 VALENCIA DR City-St-Zip: NAPLES, FL 34120	ge () Addition R
Title: Name: Address: City-St-Zip:	VD () Delete HERNANDEZ, ALDO A 521 W 36 PLACE HIALEAH, FL 33012	Title: () Chang Name: Address: City-St-Zip:	ge () Addition
Title: Name: Address: City-St-Zip:	TD () Delete DIAZ, OSCAR 951 SW 68TH COURT MIAMI, FL 33144	Title: () Change Name: Address: City-St-Zip:	ge () Addition

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.

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

SIGNATURE: NESTOR FERNANDEZ PRES 05/11/2007

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