

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011986

Entity Name: FUNDACION QUIVICAN, INC.

FILED
Apr 17, 2008
Secretary of State

Current Principal Place of Business:

3210 VALENCIA DR
NAPLES, FL 34120

New Principal Place of Business:

951 SW 68 CT
4
MIAMI, FL 33144

Current Mailing Address:

3210 VALENCIA DR
NAPLES, FL 34120

New Mailing Address:

951 SW 68 CT
4
MIAMI, FL 33144

FEI Number: 41-2188394

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERNANDEZ, NESTOR
3210 VALENCIA DR
NAPLES, FL 34120 US

Name and Address of New Registered Agent:

DIAZ, OSCAR
951 SW 68 CT
4
MIAMI, FL 33144 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: OSCAR DIAZ

04/17/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FERNANDEZ, NESTOR
Address: 3210 VALENCIA DR
City-St-Zip: NAPLES, FL 34120

Title: VD () Delete
Name: HERNANDEZ, ALDO A
Address: 521 W 36 PLACE
City-St-Zip: HIALEAH, FL 33012

Title: TD () Delete
Name: DIAZ, OSCAR
Address: 951 SW 68TH COURT
City-St-Zip: MIAMI, FL 33144

Title: SD () Delete
Name: SALGADO, JAIME R
Address: 10247 SW 24 STREET #D-276
City-St-Zip: MIAMI, FL 33165

Title: D () Delete
Name: RODRIGUEZ, EDUARDO PR
Address: 1270 W. 42ND STREET #204
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DIAZ, OSCAR
Address: 951 SW 68 CT APT 4
City-St-Zip: MIAMI, FL 33144

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: OSCAR DIAZ

PD

04/17/2008

Electronic Signature of Signing Officer or Director

Date