2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007603

City-St-Zip:

MIAMI, FL 33131

FILED Apr 28, 2008 Secretary of State

Entity Name: AROD FAMILY FOUNDATION, INC. **Current Principal Place of Business: New Principal Place of Business:** C/O MORRISON, BROWN, ARGIZ & FARRA, LLP 1001 BRICKELL BAY DRIVE, 9TH FLOOR MIAMI, FL 33131 **Current Mailing Address: New Mailing Address:** C/O MORRISON, BROWN, ARGIZ & FARRA, LLP 1001 BRICKELL BAY DRIVE, 9TH FL MIAMI, FL 33131 FEI Number: 20-5225825 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BAKHAI, KASHYAP C/O MORRISON, BROWN, ARGIZ & FARRA, LLP 1001 BRICKELL BAY DRIVE, 9TH FL MIAMI, FL 33131 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition RODRIGUEZ, ALEXANDER E Name: Name: Address: 1001 BRICKELL BAY DRIVE, 9TH FL Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip: Title: () Delete Title: () Change () Addition RODRIGUEZ, CYNTHIA Name: Name: Address: 1001 BRICKELL BAY DRIVE, 9TH FLOOR Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip: Title: SEC. () Delete Title: () Change () Addition GILSON, LISA Name: Name: 1001 BRICKELL BAY DRIVE, 9TH FLOOR Address: Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip: Title: TR. () Delete Title: () Change () Addition BAKHAI, KASHYAP Name: Name: 1001 BRICKELL BAY DRIVE, 9TH FLOOR Address: Address:

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.

City-St-Zip:

SIGNATURE: ALEX RODRIGUEZ P 04/28/2008