

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010819

FILED
Apr 05, 2007
Secretary of State

Entity Name: JOHN KRUSZ FOUNDATION INC

Current Principal Place of Business:

4970 SW 72 AVE SUITE 107
MIAMI, FL 33155

New Principal Place of Business:

Current Mailing Address:

4970 SW 72 AVE SUITE 107
MIAMI, FL 33155

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASPONS, MIGUEL
4970 SW 72 AVE SUITE 107
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: MASPONS, MIGUEL
Address: 4970 SW 72 AVE SUITE 107
City-St-Zip: MIAMI, FL 33155

Title: V () Delete
Name: MOLINA, ALBERT
Address: 4970 SW 72 AVE SUITE 107
City-St-Zip: MIAMI, FL 33155

Title: T () Delete
Name: KRUSZ, DAVID
Address: 44 ENDICOTT STREET
City-St-Zip: DEDHAN, MA 02026

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 MASPONS

P

04/05/2007

Electronic Signature of Signing Officer or Director

Date