

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Sep 14, 2012**  
**Secretary of State**

DOCUMENT# N06000012596

**Entity Name:** MARIA LUISA DE MORENO INTERNATIONAL FOUNDATION, INC.**Current Principal Place of Business:**6099 STIRLING RD, SUITE 105  
DAVIE, FL 33314**New Principal Place of Business:**12555 ORANGE DRIVE  
SUITE 103  
DAVIE, FL 33330**Current Mailing Address:**6099 STIRLING RD, SUITE 105  
DAVIE, FL 33314**New Mailing Address:**12555 ORANGE DRIVE  
SUITE 103  
DAVIE, FL 33330**FEI Number:** 20-8711010**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CARABEO, SUSANA  
6099 STIRLING ROAD  
SUITE 105  
DAVIE, FL 33314 US**Name and Address of New Registered Agent:**CARABEO, SUSANA  
12555 ORANGE DRIVE  
SUITE 103  
DAVIE, FL 33330 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: SUSANA CARABEO

09/14/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: DE MORENO, MARIA LUISA P  
Address: 16100 EMERALD ESTATES DRIVE, #385  
City-St-Zip: WESTON, FL 33331

Title: DV  
Name: MENDOZA, MARIA C  
Address: 16100 EMERALD ESTATES DRIVE, #385  
City-St-Zip: WESTON, FL 33331

Title: S  
Name: CARABEO, SUSANA P  
Address: 4192 PINE RIDGE LANE  
City-St-Zip: WESTON, FL 33331

I hereby 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 all other like empowered.

SIGNATURE: SUSANA CARABEO

S

09/14/2012

Electronic Signature of Signing Officer or Director

Date