

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002670

FILED  
Apr 29, 2008  
Secretary of State

**Entity Name:** FUNDACION AMOR Y FE, LOVE AND FAITH FOUNDATION, COMMUNITY DEVELOPMENT CORPORATION

**Current Principal Place of Business:**

5859 SW 16 STREET  
MIAMI, FL 33155

**New Principal Place of Business:**

**Current Mailing Address:**

5859 SW 16 STREET  
MIAMI, FL 33155

**New Mailing Address:**

**FEI Number:** 20-8657299

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SAAVEDRA, OSCAR G  
16086 SW 101 TERRACE  
MIAMI, FL 33196 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: DP ( ) Delete  
Name: SAAVEDRA, OSCAR G  
Address: 16086 SW 101 TERRACE  
City-St-Zip: MIAMI, FL 33196

Title: DV ( ) Delete  
Name: GIRALDO, LUZ A  
Address: 15973 SW 74 STREET  
City-St-Zip: MIAMI, FL 33193

Title: DS ( ) Delete  
Name: FERNANDEZ, FERNANDO  
Address: 15973 SW 74 STREET  
City-St-Zip: MIAMI, FL 33193

Title: DT ( ) Delete  
Name: LOPEZ, ALBA  
Address: 7726 SW 102 PLACE  
City-St-Zip: MIAMI, FL 33173

**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:

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 G. MINA-SAAVEDRA

DP

04/29/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date