2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# N07000004536

Entity Name: NEW WORLD FOUNDATION, INC.

Current Principal Place of Business:

7864 NW 190 LANE
MIAMI, FL 33015

New Principal Place of Business:

Current Mailing Address:

7864 NW 190 LANE
MIAMI, FL 33015

New Mailing Address:

FEI Number: 26-0243328 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MARTINEZ, RAMON
7864 NW 190 LANE
MIAMI, FL 33015 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:	PD	( ) Delete
Name:	MARTINEZ, RAMON	
Address:	7864 NW 190 LANE	
City-St-Zip:	MIAMI, FL 33015	
Title:	VPD	( ) Delete
Name:	MARTINEZ, DIANA	
Address:	7864 NW 190 LANE	
City-St-Zip:	MIAMI, FL 33015	
Title:	TD	(X) Delete
Name:	STARMAN, MELISSA	
Address:	9835 SW 77 TERRACE	
City-St-Zip:	MIAMI, FL 33173	
Title:	SD	( ) Delete
Name:	CARREIRA, PEGGY	
Address:	18660 LENAIRE DRIVE	
City-St-Zip:	MIAMI, FL 33157	
Title:	D	( ) Delete
Name:	CARREIRA, GERMANO	
Address:	18660 LENAIRE DRIVE	
City-St-Zip:	MIAMI, FL 33157	

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:	
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: DIANA MARTINEZ VPD 03/24/2009

Electronic Signature of Signing Officer or Director — Date