

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010781

FILED  
Aug 11, 2009  
Secretary of State

**Entity Name:** ACADEMICS, ARTS, ATHLETICS FOUNDATION, INC.

**Current Principal Place of Business:**

11040 SW 40 STREET  
MIAMI, FL 33165

**New Principal Place of Business:**

**Current Mailing Address:**

11040 SW 40 STREET  
MIAMI, FL 33165

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

O'MALLEY, ROBERT M ESQ  
155 SOUTH MIAMI AVE  
9TH FLOOR JUSTICE BUILDING  
MIAMI, FL 33130 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: RIERA, MANUEL  
Address: 11040 SW 40 ST  
City-St-Zip: MIAMI, FL 33165

Title: VP ( ) Delete  
Name: FERRER, MANUEL  
Address: 11040 SW 40 STREET  
City-St-Zip: MIAMI, FL 33165

Title: VP ( ) Delete  
Name: DIAZ, MANUEL JR  
Address: 11040 SW 40 STREET  
City-St-Zip: MIAMI, FL 33165

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: FERRER, MARIA  
Address: 11040 SW 40 STREET  
City-St-Zip: MIAMI, FL 33165

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: MANUEL RIERA

P

08/11/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date