

**2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 29, 2011  
Secretary of State**

DOCUMENT# N09000000833

**Entity Name:** THE ALFREDO IGLESIAS TRAUMA FOUNDATION, INC.

**Current Principal Place of Business:**

10930 SW 136TH STREET  
MIAMI, FL 33176

**New Principal Place of Business:**

**Current Mailing Address:**

10930 SW 136TH STREET  
MIAMI, FL 33176

**New Mailing Address:**

**FEI Number:** 90-0439659      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

IGLESIAS, ALFREDO  
10930 SW 136 ST  
MIAMI, FL 33176    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  
Name: MEDINA, ANNE M  
Address: 10930 SW 136 ST  
City-St-Zip: MIAMI, FL 33176

Title: T  
Name: PIZZARO, CEASER  
Address: 10930 SW 136TH STREET  
City-St-Zip: MIAMI, FL 33176

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: ANNE MEDINA

P

03/29/2011

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

\_\_\_\_\_ Date