2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2011
Secretary of State

DOCUMENT# N09000009524

Entity Name: FUNDACION TERAPIA HOMA COLOMBIA-USA INC.

Current Principal Place of Business:

5474 NW 55 DRIVE
COCONUT CREEK, FL 33073

New Principal Place of Business:

Current Mailing Address:

5474 NW 55 DRIVE
COCONUT CREEK, FL 33073

New Mailing Address:

FEI Number: 27-1036177 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HENAO, GLORIA S
5474 NW 55 DRIVE
COCONUT CREEK, FL 33073 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
Name: HENAO, GLORIA S
Address: 5474 NW 55 DRIVE
City-St-Zip: COCONUT CREEK, FL 33073

Title: VD
Name: HENAO, GERMAN
Address: 5474 NW 55 DRIVE
City-St-Zip: COCONUT CREEK, FL 33073

Title: SD
Name: RIVERA, PABONI A
Address: 5474 NW 55 DRIVE
City-St-Zip: COCONUT CREEK, FL 33073

Title: TD
Name: RIVERA, MITCHEL D
Address: 5474 NW 55 DRIVE
City-St-Zip: COCONUT CREEK, FL 33073

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: GLORIA S. HENAO PD 04/08/2011

Electronic Signature of Signing Officer or Director Date