

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000011227

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** CHILDREN'S ALLIANCE FOUNDATION, INC

**Current Principal Place of Business:**

1346 SW 180 AVE  
PEMBROKE PINES, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

1346 SW 180 AVE  
PEMBROKE PINES, FL 33029

**New Mailing Address:**

**FEI Number:** 35-2375483

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MENENDEZ, ETIHAN  
1346 SW 180 AVE  
PEMBROKE PINES, FL 33029 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: MENENDEZ, ETIHAN  
Address: 1346 SW 180 AVE  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VPD  
Name: MENENDEZ, SONIA  
Address: 1346 SW 180 AVE  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: SD  
Name: LONDONO, KRYSTAL  
Address: 7930 CRESTI BLVD  
City-St-Zip: MIAMI BEACH, FL 33141

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: ETIHAN MENENDEZ

PD

03/15/2011

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

\_\_\_\_\_  
Date