

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10554

FILED
May 17, 2006
Secretary of State

Entity Name: INTERNATIONAL CHILDREN'S FOUNDATION, INC.

Current Principal Place of Business:

7700 N. KENDALL DRIVE
SUITE 702
MIAMI, FL 33156 US

New Principal Place of Business:

Current Mailing Address:

7700 N. KENDALL DRIVE
SUITE 702
MIAMI, FL 33156 US

New Mailing Address:

FEI Number: 59-2583756 **FEI Number Applied For ()** **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:

FLURIACH, HILDA
9021 SW 17 STREET
MIAMI, FL 33165 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: D () Delete
Name: FIGUERAS, JUAN E
Address: 4709 SW 143 AVE
City-St-Zip: MIAMI, FL 33175

Title: D () Delete
Name: CONSUEGRA, MARIA
Address: 11479C SW 109 RD
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: SOLERNOU, RAFAEL
Address: 6653 SW 92 AVE
City-St-Zip: MIAMI, FL 33173

Title: D () Delete
Name: QUESEP, BEATRIZ
Address: 9770 SW 20 ST
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: () 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 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: VIVIAN T. FIGUERAS

DIR

05/17/2006

Electronic Signature of Signing Officer or Director

Date