

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12472

FILED
Aug 15, 2007
Secretary of State

Entity Name: COLOMBIAN DISASTER FUND, INC.

Current Principal Place of Business:

175 SE 25 RD
#11A
MIAMI, FL 33129 US

Current Mailing Address:

175 SE 25 RD
#11A
MIAMI, FL 33129 US

New Principal Place of Business:

2333 BRICKELL AVE.
1112
MIAMI, FL 33129 US

New Mailing Address:

2333 BRICKELL AVE.
#1112
MIAMI, FL 33129 US

FEI Number: 59-2654854 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:

VANEGAS, MAYTE
175 SE 25 RD
#11A
MIAMI, FL 33129 US

Name and Address of New Registered Agent:

VANEGAS, MAYTE
2333 BRICKELL AVE.
#1112
MIAMI, FL 33129 US

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: MAYTE VANEGAS

08/15/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: JARAMILLO, GIULANA
Address: 6657 SW 139 AVE
City-St-Zip: MIAMI, FL 33183 US

Title: P () Delete
Name: VANEGAS, MAYTE
Address: 175 SE 25 RD # 11A
City-St-Zip: MIAMI, FL 33129 US

Title: D () Delete
Name: MD. PABLO, ZERQUERA
Address: 3970 SW 67 AVE.
City-St-Zip: MIAMI, FL 33155

Title: D () Delete
Name: MD. LIARYS, DOMINGUEZ
Address: 3970 SW 67 AVE.
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: JARAMILLO, JUAN CARLOS
Address: 12960 SW 50 ST.
City-St-Zip: MIAMI, FL 33183 US

Title: P (X) Change () Addition
Name: VANEGAS, MAYTE
Address: 2333 BRICKELL AVE. SUITE 1112
City-St-Zip: MIAMI, FL 33129 US

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 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: MAYTE VANEGAS

P

08/15/2007

Electronic Signature of Signing Officer or Director

Date