

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

DOCUMENT# N18155

**FILED**  
**Mar 01, 2011**  
**Secretary of State**

**Entity Name:** ADULTS MANKIND ORGANIZATION, INC. (AMOR)

**Current Principal Place of Business:**

4343 W. FLAGLER ST.  
STE. 300  
MIAMI, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

4343 W. FLAGLER ST.  
STE. 300  
MIAMI, FL 33134 US

**New Mailing Address:**

**FEI Number:** 59-2851713      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

VILLALBA, JORGE  
6415 SW 133 CT  
MIAMI, FL 33183 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: JORGE, VILLALBA S  
Address: 6415 SW 133 CT.  
City-St-Zip: MIAMI, FL 33183

Title: SD  
Name: TRASOBARES, JOAN  
Address: 3618 SW 25 STREET  
City-St-Zip: MIAMI, FL 33133

Title: TD  
Name: CARULLA, CARMEN  
Address: 1923 SW 18 STREET  
City-St-Zip: MIAMI, FL 33145

Title: D  
Name: LLORET, PATRICIA M  
Address: 1121 SW 122 AVE # 302-2  
City-St-Zip: MIAMI, FL 33184

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: JORGE S. VILLALBA

PD

03/01/2011

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

\_\_\_\_\_  
Date