

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34436

FILED
Jan 11, 2008
Secretary of State

Entity Name: CHILDREN'S FOUNDATION TO DRESS THE HUMBLE, INC.

Current Principal Place of Business:

717 PONCE DE LEON BLVD.
329
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

PO BOX 141699
MIAMI, FL 33114

New Mailing Address:

FEI Number: 65-0244208

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MORA, LUIS E
717 PONCE DE LEON BLVD.
SUITE 329
CORAL GABLES, FL 33134 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: MORA, LUIS E
Address: 3262 SW 139 PL
City-St-Zip: MIAMI, FL 33175

Title: D () Delete
Name: MORA, CRISTINA
Address: 3262 SW 139 PL
City-St-Zip: MIAMI, FL 33175

Title: D () Delete
Name: MORA, ANA J
Address: 3262 SW 139 PL
City-St-Zip: MIAMI, FL 33175

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:

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: LUIS E. MORA

D

01/11/2008

Electronic Signature of Signing Officer or Director

Date