

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38885

FILED  
Jan 05, 2007  
Secretary of State

**Entity Name:** ADORNO & YOSS EMPLOYEES CHARITABLE FOUNDATION, INC.

**Current Principal Place of Business:**

2525 PONCE DE LEON BLVD.  
SUITE 400  
MIAMI, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

2525 PONCE DE LEON BLVD.  
SUITE 400  
MIAMI, FL 33134 US

**New Mailing Address:**

**FEI Number:** 65-0202632

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GUERRA, PHILLIP  
2525 PONCE DE LEON BLVD.  
SUITE 400  
MIAMI, 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: T ( ) Delete  
Name: ADORNO, HENRY N.,  
Address: 2525 PONCE DE LEON BLVD, STE 400  
City-St-Zip: MIAMI, FL 33134 US

Title: T ( ) Delete  
Name: YOSS, GEORGE T  
Address: 2525 PONCE DE LEON BLVD, STE 400  
City-St-Zip: MIAMI, FL 33134 US

Title: PT ( ) Delete  
Name: GUERRA, PHILLIP  
Address: 2525 PONCE DE LEON BLVD, STE 400  
City-St-Zip: MIAMI, FL 33134 US

**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 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: PHILLIP GUERRA

P

01/05/2007

Electronic Signature of Signing Officer or Director

Date