

# **2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N48412

**FILED**  
**Apr 30, 2009**  
**Secretary of State**

**Entity Name:** OPERATION KIMBE FOUNDATION, INC.

**Current Principal Place of Business:**

9999 N.E. 2ND AVENUE  
SUITE 209  
MIAMI SHORES, FL 33138

**New Principal Place of Business:**

**Current Mailing Address:**

8788 S.W. 8TH STREET  
MIAMI, FL 33174 US

**New Mailing Address:**

**FEI Number:** 65-0352351

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COMPANY MANAGEMENT SERVICES, LLC  
8788 S.W. 8TH STREET  
MIAMI, FL 33174 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: DP ( ) Delete  
Name: MOISE, RUDOLPH  
Address: 9999 N.E. 2ND AVENUE  
City-St-Zip: MIAMI SHORES, FL 33138

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: MOISE, GUY RUDOLPH  
Address: 9999 N.E. 2ND AVE, SUITE 209  
City-St-Zip: MIAMI SHORES, FL 33138

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: GUY RUDOLPH MOISE

P

04/30/2009

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

\_\_\_\_\_  
Date