

FILE NOW: FILING FEE IS \$61.25

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Apr 13 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000000580 (1)
1. Corporation Name
FRIENDS FOR EL SALVADOR INC.



Principal Place of Business Mailing Address
100 S.E. 2ND ST., 37TH FLOOR MIAMI FL 33130
100 S.E. 2ND ST., 37TH FLOOR MIAMI FL 33130

3. Date Incorporated or Qualified
02/10/1993

4. FEI Number
65-0398665

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 28 Zip

24 Country 25 Country 29 Country 30 Country

9. Name and Address of Current Registered Agent
BEFELER, GEORGE
100 S.E. 2ND ST., 37TH FLOOR
NATIONS BANK TOWER
MIAMI FL 33130

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	ALVAREZ, ERNESTO	1.2 NAME	Guido Mesa
STREET ADDRESS	2121 PONCE DE LEON	1.3 STREET ADDRESS	13240 SW 17 Lane # 8
CITY-ST-ZIP	CORAL GABLES FL	1.4 CITY-ST-ZIP	Miami FL 33175
TITLE	D	2.1 TITLE	D
NAME	BEFELER, GEORGE	2.2 NAME	Befeler, George
STREET ADDRESS	150 W FLAGLER ST SUITE 2701	2.3 STREET ADDRESS	100 SE 2nd Street, #3700
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	Miami, FL 33131
TITLE	D	3.1 TITLE	D
NAME	SALUME, ADOLFO	3.2 NAME	Maria Alicia Mesa
STREET ADDRESS	501 BRICKELL AVE SUITE 200	3.3 STREET ADDRESS	13240 SW 17th Lane # 8
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	Miami FL 33175
TITLE	D	4.1 TITLE	D
NAME	HENRIQUEZ, RAUL	4.2 NAME	Mario Gomez Zimicoma
STREET ADDRESS	777 BRICKELL AVENUE, SUITE 1010	4.3 STREET ADDRESS	5991 SW 135 Terrace
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	Miami FL 33156
TITLE	VP	5.1 TITLE	VP
NAME	SOLER, ANA V	5.2 NAME	Soler, Ana V.
STREET ADDRESS	200 E. 65TH STREET	5.3 STREET ADDRESS	200 E. 65 St, Apt 20FG
CITY-ST-ZIP	NEW YORK NY 10021	5.4 CITY-ST-ZIP	New York, New York 10021
TITLE		6.1 TITLE	D
NAME		6.2 NAME	Maria Luz Gomez
STREET ADDRESS		6.3 STREET ADDRESS	5991 SW 135 Terrace
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Miami, FL 33156

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* 3-10-98 (305) 379-830

CR2E037 (10/97)