2000 UNIFORM BUSINESS REPORT (UBR)

FILED May 01, 2000 8:00 am Secretary of State DOCUMENT # **N93000000580** 1. Entity Name FRIENDS FOR EL SALVADOR INC. 05-01-2000 90005 039 ***150.00 Principal Place of Business Mailing Address 701 BRICKELL AVE 701 BRICKELL AVE #2000 #2000 **MIAMI FL 33131** MIAMI FL 33131-2834 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0398665 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BEFELER, GEORGE 701 BRICKELL AVENUE #2000 **MIAMI FL 33131** Zip Code FL 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PD TITLE Delete TITLE ☐ Change Addition NAME ALVAREZ, ERNESTO NAME STREET ADDRESS **580 PARK AVENUE** STREET ADDRESS CITY-ST-ZIP NEW YORK NY 10021 CITY-ST-ZIP TITLE ☐ Defete TITLE Change ☐ Addition NAME BEFELER, GEORGE NAME STREET ADDRESS 701 BRICKELL AVENUE #2000 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP <u>MIAMI FL 33131</u> TITLE SD ☐ Delete TITLE Change ☐ Addition NAME DAUBER, CAROL NAME STREET ADDRESS 225 EAST 73RD STREET STREET ADDRESS CITY-ST-ZIP NEW YORK NY 10021 CITY-ST-ZIP TITLE TD ☐ Delete TITLE ☐ Change Addition NAME MANNY, MARIA ELENA NAME STREET ADDRESS 96 ALGONQUIN RD STREET ADDRESS CITY-ST-ZIP **BRONXVILLE NY 10710** CITY-ST-ZIP Delete TITLE Change ☐ Addition SOLER, ANA V NAME STREET ADDRESS 200 E. 65TH ST. APT. 20FG STREET ADDRESS CITY-ST-ZIP NEW YORK NY 10021 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. GEORGE BEFELER

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

IRECTOR