SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97; \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # N9500004209 (1)

COSTA-RICAN AMERICAN FOUNDATION, INC.

FILED Sep 19 1997 8:00am Secretary of State

Principal Place of Business Mailing Address				I INTILIAL BIN INIOI DISIL DELLI GERIL O	Diff Bosin adin Arbib Half Balib (All INE)	
			10651 SW 88TH STREET STE 206			
MIAMI FL 33176		MIAMI FL 33176			DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 08/31/1995	3a. Date of Last Report 04/05/1996	
2. Principal P	lace of Business SW 88Th Street	2a. Mailing Address 26 106515W 9	18th Street	4. FEI Number 65-0612182	Applied For Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc. 27 Suite 205		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	Florida	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 3317	Country 25 U.S.A.	29 33176	Country A	This corporation owes or has pa Personal Property Tax due June		
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent	
			81 Name	Dennis R. Haber ?	? A .	
CERDAS, ANNETTE L			82	450 MADRUGA AVE	ole)Suite 305	
11710 SW 110TH LANE MIAMI FL 33188			83	430 MADHOGA AVERS	DUTLE 202	
MIAMIPL	. 33100				· · · · · · · · · · · · · · · · · · ·	
			84 City	Coral Gables	FL 85 33295	
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statute	s, the above-name it	corporation submits this statement for the p	ourpose of changing its registered	
office or r agent. I a	egistered agent, or both, in the State in familiar with, and accept the obliga	tions of Section 617.0503, Nor	umonzeo by the corp rida Statutes.	corporation submits this statement for the poration's board of directors. I hereby acceptable	of the appointment as registered	
SIGNATURE			/2/		18/03/9/	
12.	Signature, typed or printed name of registered agen OFFICERS AND		Registered Agen signature :	ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTORS IN 12	
TITLE	PD	DELETE	1.1 TITLE	PD- DIRECTOR	Change Addition	
NAME	Cerdas, Sergio M		1.2 NAME	CERDAS, SERGIO M		
STREET ADDRESS	11710 SW 110TH LANE		1.3 STREET ADDRESS	11625 S.W. 101 Ter	יזי .	
CITY-ST-ZIP	MIAMI FL 33186 VD	DELETE	1.4 CITY - ST - ZIP	MIAMI, FLORIDA 33	Change Addition	
TITLE OUT	RICHMAN, ISAURA M	DE DETELE	2.1 TITLE 2.2 NAME		. Cuanta 🗀 vacaran	
STREET ADDRESS	1402 SO. BAYSHORE DRIVE S	TE 1501	2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33131		2. 4 CITY-ST-ZIP		/ ·	
TITLE	SD	DELETE	3.1 TITLE	VD	Change Addition	
NAME	JOYNAZ, JOSE		3.2 NAME	ANNETTE LOYNAZ CEI	RDAS	
STREET ADDRESS	7530 CENTER BAY DRIVE		3.3 STREET ADDRESS	11625 S.W. 101 TEN		
CITY-ST-ZIP TITLE	NO. BAY VILLAGE FL 33141	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	MIAMI, FLORIDA 331	L76 ☐ Change ☐ Addition	
NAME		beent	4.1 MAME		□ AutanAn □ Vanggrou	
STREET ADDRESS			4.3 STREET ADDRESS	· ···		
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME		· .	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP		☐ DELETE	5.4 CITY-ST-ZIP		Change Addition	
TITLE		C) DETER	6.1 TITLE		m clights T vigition	
NAME Street address i			6.2 NAME 6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 his 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.