

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 15, 2007 08:00 AM
Secretary of State

DOCUMENT # N96000004101	
1. Entity Name FUNDACION MANUEL ARTIME CORP.	

Principal Place of Business 8230 N.W. 163 ST. MIAMI LAKES FL 33016-6153	Mailing Address 8230 N.W. 163 ST. MIAMI LAKES FL 33016-6153
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/06)

4. FEI Number 65-0769053	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ARRIZURIETA, LUIS 8230 N.W. 163 ST. MIAMI LAKES FL 33016-6153	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

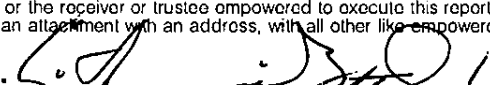
**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD ARTIME, ADELAIDA 1581 BRICKELL AVE APT PH 201 MIAMI FL 33129 ☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VED MESSER, NILO J 7801 SW 29 TERRACE MIAMI FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SD ARRIZURIETA, LUIS 8230 NW 163 ST MIAMI LAKES FL 33016-6153 ☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D RODRIGUEZ, FELIX I 215 NE 114 STREET MIAMI FL 33161 ☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D TOLEDO, RAFAEL G 9130 SW 134TH PLACE MIAMI FL 33186-1534 ☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	TD ARRIZURIETA, LUIS JR 12827 NW 23 STREET PEMBROKE PINES FL 33028 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition

U00000637581
02/26/07-80067-013 70.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

SIGNATURE:  **Luis Arrizurieta** 2/14/2007 (305) 822-5593