

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004101

FILED  
Mar 12, 2010  
Secretary of State

Entity Name: FUNDACION MANUEL ARTIME CORP.

**Current Principal Place of Business:**

8230 N.W. 163 ST.  
MIAMI LAKES, FL 330166153

**New Principal Place of Business:**

**Current Mailing Address:**

8230 N.W. 163 ST.  
MIAMI LAKES, FL 330166153

**New Mailing Address:**

FEI Number: 65-0769053

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ARRIZURIETA, LUIS  
8230 N.W. 163 ST.  
MIAMI LAKES, FL 330166153 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: PD  
Name: ARTIME, ADELAIDA  
Address: 1581 BRICKELL AVE APT PH 201  
City-St-Zip: MIAMI, FL 33129

Title: VED  
Name: MESSER, NILO J  
Address: 7801 SW 29 TERRACE  
City-St-Zip: MIAMI, FL

Title: SD  
Name: ARRIZURIETA, LUIS  
Address: 8230 NW 163 ST  
City-St-Zip: MIAMI LAKES, FL 330166153

Title: D  
Name: RODRIGUEZ, FELIX I  
Address: 215 NE 114 STREET  
City-St-Zip: MIAMI, FL 33161

Title: D  
Name: TOLEDO, RAFAEL G  
Address: 9130 SW 134TH PLACE  
City-St-Zip: MIAMI, FL 331861534

Title: TD  
Name: ARRIZURIETA, LUIS F  
Address: 12827 NW 23 STREET  
City-St-Zip: PEMBROKE PINES, FL 33028

I hereby 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 all other like empowered.

SIGNATURE: LUIS F. ARRIZURIETA

TD

03/12/2010

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

\_\_\_\_\_  
Date