

FILED
Aug 15, 2003 8:00 am
Secretary of State

08-15-2003 90083 015 ****61.25

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N96000004101

1. Entity Name
FUNDACION MANUEL ARTIME CORP.

Principal Place of Business
**6320 SW 92 COURT
MIAMI, FL 33173**

Mailing Address
**6320 SW 92 COURT
MIAMI, FL 33173**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0769053

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SALAS, OSCAR A
6320 SW 92 COURT
MIAMI, FL 33173-3**

7. Name and Address of New Registered Agent

Name
Luis Arrizurieta

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

8230 N. W. 163 Street

City

Miami Lakes

FL

Zip Code

33016-6153

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

[Signature]
LUIS ARRIZURIETA

(NOTE: Registered Agent's signature required when resigning.)

DATE

8-11-2003

**FILE NOW: FEE IS \$61.25
Initial or Amended UBR**

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 PD ☐ Delete
NAME ARTIME, ADELAIDA
STREET ADDRESS 1681 BRICKELL AVE APT PH 201
CITY-ST-ZIP MIAMI, FL 33129

TITLE VED ☐ Delete
NAME MESSER, NILO J
STREET ADDRESS 7801 SW 29 TERRACE
CITY-ST-ZIP MIAMI, FL

TITLE SD ☒ Delete
NAME SALAS, OSCAR A
STREET ADDRESS 6320 SW 92 COURT
CITY-ST-ZIP MIAMI, FL

TITLE D ☐ Delete
NAME ARIAS, SARA
STREET ADDRESS 14612 SW 45 TERRACE
CITY-ST-ZIP MIAMI, FL 33165

TITLE D ☐ Delete
NAME ARRIZURIETA, LUIS
STREET ADDRESS 8230 SW 163 STREET
CITY-ST-ZIP MIAMI, FL 33016

TITLE D ☐ Delete
NAME BLANCO, PEDRO
STREET ADDRESS 14360 SW 192 STREET
CITY-ST-ZIP MIAMI, FL 33177

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition
NAME Felix Ismael Rodriguez
STREET ADDRESS 215 N. E. 114 Street
CITY-ST-ZIP Miami, FL 33161

TITLE D ☐ Change ☒ Addition
NAME Rafael Garcia Toledo
STREET ADDRESS 9130 S. W. 134 Place
CITY-ST-ZIP Miami, FL 33186

TITLE SD ☒ Change ☐ Addition
NAME Luis Arrizurieta
STREET ADDRESS 8230 N.W. 163 St.
CITY-ST-ZIP Miami Lakes, FL 33016-6153

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 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 517, 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ADELAIDA P. ARTIME

8-11-2003

(305) 858-8915

Date

Daytime Phone #

CR2E037 (10/02)