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Apr 15 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham,
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000005889 (8)

1. Corporation Name

AMERICAN FOUNDATION FOR THE DEVELOPMENT OF NICARAGUA, INC.



Principal Place of Business

Mailing Address

C/O MARTINEZ, GUTIERREZ, DE CORDOBA,
601 BRICKELL KEY DRIVE, SUITE 501
MIAMI FL 33131-2651

C/O MARTINEZ, GUTIERREZ, DE CORDOBA,
601 BRICKELL KEY DRIVE, SUITE 501
MIAMI FL 33131-2650

3. Date Incorporated or Qualified
11/15/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24 25 29 30 9. Name and Address of Current Registered Agent

GUTIERREZ, RENALDY J
601 BRICKELL KEY DRIVE
SUITE 501
MIAMI FL 33131-2651

4. FEI Number

65-0725060

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME MONTENEGRO, HELIO
STREET ADDRESS C/O 601 BRICKELL KEY DRIVE, SUITE 601
CITY-ST-ZIP MIAMI FL 33131-2651

TITLE VPD
NAME ROMERO, RAMON
STREET ADDRESS C/O 601 BRICKELL KEY DRIVE, SUITE 601
CITY-ST-ZIP MIAMI FL 33131-2651

TITLE VPD
NAME MONTENEGRO, SAMUEL E
STREET ADDRESS C/O 601 BRICKELL KEY DRIVE, SUITE 601
CITY-ST-ZIP MIAMI FL 33131-2651

TITLE SD
NAME MAYORGA, RENE N
STREET ADDRESS C/O 601 BRICKELL KEY DRIVE, SUITE 601
CITY-ST-ZIP MIAMI FL 33131-2651

TITLE S
NAME GUTIERREZ, RENALDY J
STREET ADDRESS C/O 601 BRICKELL KEY DRIVE, SUITE 601
CITY-ST-ZIP MIAMI FL 33131-2651

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 this 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.

SIGNATURE [Signature] 2/25/97 (96) 527-4540

CR2E037 (9/96)