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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N97000006325

1. Corporation Name
AMAZON SELVA-PERU, CORP.

Principal Place of Business	Mailing Address
13075 SW 150 TERRACE MIAMI FL 33186	13075 SW 150 TERRACE MIAMI FL 33186

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualifed 11/07/1997
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 65-0793980 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip 24 Country 25	Zip 29 Country 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ANGULO, CARLOS F 13075 SW 150 TERRACE MIAMI FL 33186	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE	vice President.	☐ Change ☒ Addition
NAME	ANGULO, CARLOS F		1.2 NAME	William. S. Jacob	
STREET ADDRESS	13075 SW 150 TERRACE		1.3 STREET ADDRESS	3748 Encina Av.	
CITY-ST-ZIP	MIAMI FL 33186		1.4 CITY-ST-ZIP	La Cresenta. C.A. 9129	
TITLE	SD	☒ DELETE	2.1 TITLE	treasurer. secretary.	☒ Change ☐ Addition
NAME	DIAZ, RUTH		2.2 NAME	Ruth Diaz.	
STREET ADDRESS	11448 SW 74 TERRACE		2.3 STREET ADDRESS	11448 Sw. 74 terrace	
CITY-ST-ZIP	MIAMI FL 33176		2.4 CITY-ST-ZIP	Miami. Florida 33186	
TITLE	TD	☒ DELETE	3.1 TITLE	Program Director.	☐ Change ☒ Addition
NAME	RIO, ARMANDO M		3.2 NAME	Juan Manuel Gonzales	
STREET ADDRESS	13075 SW 150 TERRACE		3.3 STREET ADDRESS	3005 OAKHill Sbr.	
CITY-ST-ZIP	MIAMI FL 33186		3.4 CITY-ST-ZIP	Lake City-Florida 32055	
TITLE		☐ DELETE	4.1 TITLE	Program Director Exterior	☐ Change ☒ Addition
NAME			4.2 NAME	Umberto y Mariela Calle.	
STREET ADDRESS			4.3 STREET ADDRESS	Via del Lucertolone 7133	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	Arenzano Genova 16100 Italia.	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (11/98)

14. 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 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, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 04-04-99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Carlos F. Angulo