2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003101

FILED Mar 02, 2009 Secretary of State

Entity Name: VENEZUELAN AMERICAN NATIONAL FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 8181 NW 36 STREET SUITE 20-E MIAMI, FL 33166 **Current Mailing Address: New Mailing Address:** 8181 NW 36 STREET SUITE 20-E MIAMI, FL 33166 FEI Number: 65-0839357 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ADRIANZA, RAFAEL 8181 NW 36 STREET SUITE 20-E MIAMI, FL 33166 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ADRIANZA, RAFAEL Name: Name: 8181 NW 36 STREET SUITE# 20-E Address: Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip: Title: () Delete Title: () Change () Addition CACEDA, ALBERTO Name: Name: Address: 8181 NW 36 STREET SUITE # 20-E Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip: Title: () Delete Title: (X) Change () Addition RAUDALES, JOSE Name: DIAZ, LUIS Name: 8181 NW 36 STREET SUITE# 20-E 8181 NW 36 STREET SUITE# 20-E Address: Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip: MIAMI, FL 33166 Title: () Delete Title: () Change () Addition Name: RUIZ, CESAR Name: 8181 NW 36 STREET # 20-E Address: Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip: Title: () Delete Title: (X) Change () Addition ADRIANZA, CHANY FAZZINI, CHRISTIAN Name: Name: 2393 CONTINENTAL AVE SUITE B-15 2393 CONTINENTAL AVE SUITE B-15 Address: Address: City-St-Zip: TALLAHASSEE, FL 32304 City-St-Zip: TALLAHASSEE, FL 32304 Title: () Delete Title: (X) Change () Addition ADRIANZA, DAHIANA RUIZ. DAHIANA Name: Name: Address: 8181 NW 36 STREET SUIT # 20-E Address: 8181 NW 36 STREET SUIT # 20-E MIAMI, FL 33166 MIAMI, FL 33166 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RAFAEL ADRIANZA P 03/02/2009