

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003476

FILED
Jan 23, 2008
Secretary of State

Entity Name: OUR LADY OF BELEN JESUIT FOUNDATION, INC.

Current Principal Place of Business:

JESUIT COMMUNITY HOUSE
12725 SW 6 STREET, # 204
MIAMI, FL 33184 US

New Principal Place of Business:

500 SW 127 AVENUE
MIAMI, FL 33184 US

Current Mailing Address:

PO BOX 940038
MIAMI, FL 331940038 US

New Mailing Address:

500 SW 127 AVENUE
MIAMI, FL 33184 US

FEI Number: 65-0860078

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ARAN, FERNANDO
255 UNIVERSITY DRIVE
CORAL GABLES, FL 33134 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 () Delete
Name: GARCIA, MARCELINO S.J.
Address: 12725 SW 6 ST.
City-St-Zip: MIAMI, FL 33184

Title: VD () Delete
Name: BOSCH, JORGE
Address: 25 S.E. SECOND AVENUE
City-St-Zip: MIAMI, FL 33131

Title: SD () Delete
Name: CALDERIN, CAROLINA
Address: 500 SW 127 AVENUE
City-St-Zip: MIAMI, FL 33184 US

Title: TD () Delete
Name: CARTAYA, PEDRO SJ
Address: 12725 SW 6TH ST
City-St-Zip: MIAMI, FL 33184 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: CAROLINA CALDERIN

SD

01/23/2008

Electronic Signature of Signing Officer or Director

Date