

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002266

FILED
Apr 07, 2009
Secretary of State

Entity Name: ARMENGOL MEMORIAL FOUNDATION, INC.

Current Principal Place of Business:

4445 WEST 16TH AVENUE
#401
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

4445 WEST 16TH AVENUE
#401
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 65-0915274

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARMENGOL, SALVADOR
4445 W 16TH AVE.
#401
HIALEAH, FL 33012 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: ARMENGOL, SALVADOR
Address: 3641 W 2ND AVE.
City-St-Zip: HIALEAH, FL 33012

Title: SD () Delete
Name: NICOLAS, FRANCISCA
Address: 3641 W 2ND AVE.
City-St-Zip: HIALEAH, FL 33012

Title: TD () Delete
Name: ARMENGOL, MARIA A
Address: 3641 W 2ND AVE.
City-St-Zip: HIALEAH, FL 33012

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:

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: SALVADOR ARMENGOL

PRES

04/07/2009

Electronic Signature of Signing Officer or Director

Date