2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2005
Secretary of State

DOCUMENT# N99000002510

Entity Name: THE GUILLERMO AND LILLIAN SEVILLA SACASA FOUNDATION, INC.

Current Principal Place of Business:

13702 SW 109 PLACE
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

13702 SW 109 PLACE
MIAMI, FL 33176

New Mailing Address:

FEI Number: 04-3721851 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SEVILLA SOMOZA, GUILLERMO A
13702 SW 109 PLACE
MIAMI, FL 33176 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: P ( ) Delete
Name: SEVILLA, EDDA
Address: 7513 BRADLEY BLVD.
City-St-Zip: BETHESDA, MD 20816

Title: T ( ) Delete
Name: SEVILLA, LORENA
Address: 7513 BRADLEY BLVD.
City-St-Zip: BETHESDA, MD 20816

Title: S ( ) Delete
Name: SEVILLA, GUILLERMO
Address: 13702 SW 109 PLACE
City-St-Zip: MIAMI, FL 33176

Title: D ( ) Delete
Name: SOMOZA, LILLIAN
Address: 505 NAVARRE ST
City-St-Zip: CORAL GABLES, FL 33134

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: D (X) Change ( ) Addition
Name: SOMOZA, LILLIAN
Address: 3612 SW 57 AVENUE
City-St-Zip: MIAMI, FL 33155

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GUILLERMO A. SEVILLA SOMOZA D 02/22/2005

Electronic Signature of Signing Officer or Director — Date