## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000005532

FILED Mar 31, 2007 Secretary of State

Entity Name: "PUERTA DEL SOL" FOUNDATION, INC.

Current Principal Place of Business:		New Principal Place of Business:	
2344 NW SUNRISE	111 AV , FL 33332		
Current Mailing Address:		New Mailing Address:	
2344 NW SUNRISE	111 AV , FL 33332		
FEI Number	r: FEI Number Applied For (	) FEI Number Not Applicable (X) Certificate of Status D	esired ( )
Name and	d Address of Current Registered Age	nt: Name and Address of New Registered Age	ent:
2344 NW	RIA, WARA 111 AV , FL 33322 US		
Th			
	e named entity submits this statement fo e of Florida.	r the purpose of changing its registered office or registered ag	gent, or both,
	e of Florida.	r the purpose of changing its registered office or registered ag	gent, or both,
in the Stat	e of Florida.		gent, or both,
in the Stat SIGNATU	e of Florida. ** RE:		
in the Stat SIGNATU  OFFICER  Title: Name: Address:	e of Florida.  RE:  Electronic Signature of Registere	ed Agent Date	
in the Stat SIGNATU	e of Florida.  RE:  Electronic Signature of Registere  S AND DIRECTORS:  D () Delete  ARRIOLA, ANA  2611 OAKBROOK CT	ADDITIONS/CHANGES TO OFFICERS AND Title: ( ) Change ( ) Addition Name: Address:	
in the Stat SIGNATU  OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	Te of Florida.  RE:  Electronic Signature of Registere  S AND DIRECTORS:  D () Delete  ARRIOLA, ANA 2611 OAKBROOK CT  WESTON, FL 33332  D () Delete  CHAVARRIA, WARA 2344 NW 111TH AVE	ADDITIONS/CHANGES TO OFFICERS AND Title: ( ) Change ( ) Addition Name: Address: City-St-Zip: Title: ( ) Change ( ) Addition Name: Address:	

I hereby certify that the information supplied with this filing does not qualify for the 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: WARA CHAVARRIA D 03/31/2007