

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006040

FILED
Jun 14, 2007
Secretary of State

Entity Name: BARREIRO FOUNDATION INC.

Current Principal Place of Business:

1454 SW FIRST STREET
SUITE 120
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

PO BOX 015644
MIAMI, FL 331015644

New Mailing Address:

FEI Number: 65-0953039 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BARREIRO, BRUNO A
1454 SW FIRST STREET
SUITE 120
MIAMI, FL 33135 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:

Title: STD () Delete
Name: DUARTE-VIERA, ANIBAL J
Address: 5835 BLUE LAGONN DR STE 200
City-St-Zip: MIAMI, FL 33126

Title: PD () Delete
Name: BARREIRO, BRUNO A
Address: 2101 SW 4 AVENUE
City-St-Zip: MIAMI, FL 33129

Title: VPD () Delete
Name: BARREIRO, GUSTAVO A
Address: 1466 SW 1 STREET, APT. 4
City-St-Zip: MIAMI, FL 33135

Title: D () Delete
Name: AROSTEGUI, EMILIO
Address: 418 SW 87TH CT
City-St-Zip: MIAMI, FL 33174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: DUARTE-VIERA, ANIBAL J
Address: 5835 BLUE LAGONN DR STE 200
City-St-Zip: MIAMI, FL 33126

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

Title: VPD (X) Change () Addition
Name: BARREIRO, ALICIA P
Address: 325 OCEAN DRIVE APT. 510
City-St-Zip: MIAMI BEACH, FL 33139

Title: TD (X) Change () Addition
Name: AROSTEGUI, EMILIO
Address: 418 SW 87TH CT
City-St-Zip: MIAMI, FL 33174

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: BRUNO A. BARREIRO

PD

06/14/2007

Electronic Signature of Signing Officer or Director

_____ Date