182

NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
DEC 26 AM 12:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N99000006582

1. Entity Name
MANSO FOUNDATION, INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
10681 SW 156 PL	SAME
Suite, Apt. #, etc. STE # 416	Suite, Apt. #, etc.
City & State MIAMI, FLORIDA	City & State
Zip 33196 Country DADE	Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 650961280 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name ROGUE H. VELAZQUEZ

Street Address (P.O. Box Number is Not Acceptable) 20 ALHAMBRA CIRCLE
VILLA 45

City CORAL GABLES FL Zip Code 33134

8. 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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE Rogue H Velazquez - ACCOUNTANT Rogue H Velazquez 11/13/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25 Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	TORRES JULIO
STREET ADDRESS	10681 SW 156 PL #416
CITY-ST-ZIP	MIA FL 33196
TITLE	TD
NAME	SOLA IVONE
STREET ADDRESS	10681 SW 156 PL #416
CITY-ST-ZIP	MIA FL 33196
TITLE	SD
NAME	JANUION, JOSE
STREET ADDRESS	10681 SW 156 PL #416
CITY-ST-ZIP	MIA, FL 33196
TITLE	VD
NAME	DAVIS WILLIAMS C III
STREET ADDRESS	10681 SW 156 PL #416
CITY-ST-ZIP	MIA FL 33196
TITLE	~~TD~~ MD
NAME	ROGUE H. VELAZQUEZ CC,
STREET ADDRESS	20 ALHAMBRA CIRCLE VILLAS
CITY-ST-ZIP	FL 33134
TITLE	
NAME	
STREET ADDRESS	
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CR2E037B (12/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] MR. JULIO TORRES PRESIDENT 11/13/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

232

ACCOUNTING OFFICE
ROQUE H. VELAZQUEZ

December 18, 2003

Florida Department of State.
Division of Corporations
c/o Sean Toner
P.O. Box 6327
Tallahassee, Florida 32314

Subject: Manso Foundation, Inc.
Ref: # N99000006582

Dear Administrator

I like to take this opportunity to introduce my self, my name is Roque H. Velazquez Accountant and Managing Director for the Manso Foundation.

According to the officers and directors, the 2002 Uniform Business Report was never received. That is why I ask for a one time only opportunity to reinstate this Corporation with no penalty or reinstatement fee.

Again I thank you in advance for your cooperation with this matter and I look forward to a favorable response.

Should you have any questions please do not hesitate to call.

Sincerely,

Roque H. Velazquez CPA

20 ALHAMBRA CIRCLE VILLA #5 • CORAL GABLES, FLORIDA 33134
PHONE #305.445.0985 FAX #305.476.9370
E-MAIL: ROQUEV816@AOL.COM