2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000166311

Entity Name: MAYTE PRIDA FOUNDATION, INC.

FILED Apr 23, 2008 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	ELL KEY DR					
2307 MAMI, FL 3	33131					
,	iling Addres	e'	New Maili	ng Address		
Juli Cilt Ma	illing Addres	3.	New Main	ng Address	•	
388 BRICKE 2307	ELL KEY DR					
ЛІАМІ, FL 3	33131					
El Number: 2	20-5470158	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and A	Address of C	urrent Registered Agent:	Name and	Address of	New Registered Agent:	
2307	ELL KEY DR					
ИIAMI, FL 3	33131 US					
Γhe above r n the State		submits this statement for the pur	pose of changing i	ts registered	office or registered agent, or both,	
SIGNATURI	⊏.					
SIGNATUR	⊏.					
SIGNATUR		ic Signature of Registered Agent			Date	
	Electron	ic Signature of Registered Agent Trust Fund Contribution ().			Date	
Election Cam	Electron	Trust Fund Contribution ().		S/CHANGE	Date S TO OFFICERS AND DIRECTORS	
Election Camp DFFICERS Title: Jame: Address:	Electron paign Financing	TORS: Delete KEY DR				
DFFICERS Title: Jame: Address: City-St-Zip: Jame: Jame: Address:	Electron paign Financing AND DIRECT DP () PRIDA, MAYTE 888 BRICKELL MIAMI, FL 3313	Trust Fund Contribution (). FORS: Delete KEY DR 31 Delete T KEY DR	ADDITION Title: Name: Address:		S TO OFFICERS AND DIRECTOR	
DFFICERS Title: Jame: Address: City-St-Zip: Jame: Jame: Address:	Electron paign Financing AND DIRECT DP () PRIDA, MAYTE 888 BRICKELL MIAMI, FL 3313 DT () PRIDA, MARIA 888 BRICKELL MIAMI, FL 3313	Trust Fund Contribution (). FORS: Delete KEY DR 31 Delete F KEY DR 31 Delete DR APT 501	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:		S TO OFFICERS AND DIRECTOR	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MAYTE PRIDA DP 04/23/2008