

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008560

FILED  
Mar 06, 2007  
Secretary of State

Entity Name: FUNDACION KANJOBAL GUATEMALTECA, INC.

**Current Principal Place of Business:**

1101 N.W. 9TH COURT  
HOMESTEAD, FL 33030

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 901436  
HOMESTEAD, FL 33030

**New Mailing Address:**

FEI Number: 75-3087248      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FRANCISCO, ANTONIO LEON  
1101 N.W. 9TH COURT  
HOMESTEAD, FL 33030      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: PD      ( ) Delete  
Name: FRANCISCO, ANTONIO LEON  
Address: 1101 N.W. 9TH COURT  
City-St-Zip: HOMESTEAD, FL 33030

Title: VPD      ( ) Delete  
Name: JUAREZ, MARCOS  
Address: 1141 NW 9TH ST  
City-St-Zip: HOMESTEAD, FL 33030

Title: DS      ( ) Delete  
Name: DIEGO, MIGUEL  
Address: 1227 N.W. 12TH ST.  
City-St-Zip: HOMESTEAD, FL 33030

Title: TREA      ( ) Delete  
Name: MARCOS, GERONIMO  
Address: 1291 N.W. 10TH ST.  
City-St-Zip: HOMESTEAD, FL 33030

Title: TRES      ( ) Delete  
Name: PEDRO, ANDRES  
Address: 600 N.W. 8TH AVE.  
City-St-Zip: HOMESTEAD, FL 33030

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

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

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: FRANCISCO ANTONIO LEON

PRES

03/06/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date