

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000003097

Entity Name: FONDATION ROSE MINA DE DIEGUE INC.**Current Principal Place of Business:**723 S SWINTON BLVD
#2
DELRAY BEACH, FL 33444**Current Mailing Address:**723 S SWINTON BLVD #2
DELRAY BEACH, FL 33444 US**FEI Number: NOT APPLICABLE****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**EDOUARD, RAINA
3313 WEST INVERRARY BLVD
LAUDERHILL, FL 33319 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

Officer/Director Detail :

Title PRESIDENT / PASTOR
Name FERNANDEZ, MARIE R
Address 723 S SWINTON BLVD #2
City-State-Zip: DELRAY BEACH FL 33444

Title VP
Name EDOUARD, MARIE S
Address 723 S SWINTON BLVD #2
City-State-Zip: DELRAY BEACH FL 33444

Title VP
Name EDOUARD, JEAN B
Address 723 S SWINTON BLVD #2
City-State-Zip: DELRAY BEACH FL 33444

Title VP
Name EDOUARD-CHARLES, MARIE K
Address 723 S SWINTON BLVD #2
City-State-Zip: DELRAY BEACH FL 33444

Title VP
Name EDOUARD, JEAN P
Address 723 S SWINTON BLVD #2
City-State-Zip: DELRAY BEACH FL 33444

Title VP
Name EDOUARD, RAINA
Address 723 S SWINTON BLVD #2
City-State-Zip: DELRAY BEACH FL 33444

Title VP
Name JULIEN, RACHEL
Address 723 S SWINTON BLVD #2
City-State-Zip: DELRAY BEACH FL 33444

I hereby 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 all other like empowered.

SIGNATURE: RAINA EDOUARD

VP

04/24/2013

Electronic Signature of Signing Officer/Director Detail

Date