

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 732592

**Entity Name:** LIGA CONTRA EL CANCER, INC.**Current Principal Place of Business:**2180 S.W. 12 AVENUE  
MIAMI, FL 33129**Current Mailing Address:**2180 S.W. 12 AVENUE  
MIAMI, FL 33129**FEI Number:** 59-1629554**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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
Name	VILLA, LUIS MD
Address	200 CAUSARINA CONCOURSE
City-State-Zip:	CORAL GABLES FL 33143

Title	VP
Name	GARCIA, MARIANA
Address	2000 S. BAYSHORE DRIVE # 57
City-State-Zip:	MIAMI FL 33133

Title	TREASURER
Name	ALFONSO, MANUEL
Address	8330 S.W. 11 TERRACE
City-State-Zip:	MIAMI FL 33144

Title	VP
Name	CORA, ADRIANA
Address	6051 S.W. 47TH STREET
City-State-Zip:	MIAMI FL 33155

Title	VP
Name	BLANCH, HILDA MM
Address	7945 S.W. 79TH TERRACE
City-State-Zip:	MIAMI FL 33143

Title	ADMINISTRATOR
Name	SCHEKER, CESAR A.
Address	12000 FOX HILL CIRCLE
City-State-Zip:	BOYNTON BEACH FL 33473

*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:** CESAR SCHEKER**ADMINISTRATOR****06/09/2020**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date