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: SONIA GARCIA

Electronic Signature of Signing Officer/Director Detail

PD

04/29/2017

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

7700 NORTH KENDALL DRIVE **SUITE 501** MIAMI, FL 33156 US

Current Principal Place of Business:

FEI Number: 59-2116697

DOCUMENT# 744022

MIAMI, FL 33165

3878 SOUTHWEST 107 AVENUE

Current Mailing Address:

Name and Address of Current Registered Agent:

CADICORP MANAGEMENT GROUP 7700 NORTH KENDALL DRIVE SUITE 501 MIAMI, FL 33156 US

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	TD	Title	SD
Name	MARQUEZ, LUIS	Name	GARCIA, ORLANDO
Address	9020 SW 10TH TERRACE	Address	3860 SW 107TH AVENUE
City-State-Zip:	MIAMI FL 33174	City-State-Zip:	MIAMI FL 33165
			_
Title	PD	Title	D
Title Name	PD GARCIA, SONIA	Title Name	D LANA, JUAN

Date

FILED Apr 29, 2017 Secretary of State CC6675555625