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: YOLANDA SALAS-AMARO

Electronic Signature of Signing Officer/Director Detail

Electronic Signature of Registered Agent **Officer/Director Detail :** Title PD Title SD SALAS-AMARO, YOLANDA Name

MIAMI, FL 33125	
FEI Number: 59-1795407	Certifica
Name and Address of Current Registered Agent:	
SALAS-AMARO VOLANDA	

SALAS-AMARO, YOLANDA 910 N.W. 22 AVE. MIAMI, FL 33125 US

City-State-Zip: MIAMI FL

TD

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:

Address

Title

Name Address

City-State-Zip:

DOCUMENT# 744748

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: HIJAS DE LA ACACIA, INC.

Current Principal Place of Business:

910 N.W. 22 AVE. MIAMI, FL 33125

Current Mailing Address:

910 N.W. 22 AVE.

534 S W 68 AVE

CABRERA, GLORIA

910 NW 22 AVE

MIAMI FL 33125

ate of Status Desired: No

Name NOGUER, MARIA Address 910 NW 22ND AVE City-State-Zip: MIAMI FL 33125

01/25/2016

Date

Date

PD