

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005348

Entity Name: PROFESA NATIONAL, INC.

Current Principal Place of Business:

14801 SW 20 ST
MIRAMAR, FL 33025

Current Mailing Address:

PO BOX 524288
MIAMI, FL 33152 US

FEI Number: 20-0074114

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VAZQUEZ, LUIS J
5770 SW 148 PL
MIAMI, FL 33193 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: LUIS J VAZQUEZ

04/03/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name CABAN, BENJAMIN J
Address 14801 SW 20 ST
City-State-Zip: MIRAMAR FL 33025

Title VP
Name CABAN, BEJAMIN G
Address PO BOX 524288
City-State-Zip: MIAMI FL 33152

Title TREASURER
Name VAZQUEZ, LUIS J
Address PO BOX 524288
City-State-Zip: MIAMI FL 33152

Title VP
Name MENDEZ, LUIS
Address PO BOX 524288
City-State-Zip: MIAMI FL 33152

Title SECRETARY
Name LAGUNA, MILAGROS
Address PO BOX 524288
City-State-Zip: MIAMI FL 33152

Title OFFICER
Name CRUZ, JOSE
Address PO BOX 524288
City-State-Zip: MIAMI FL 33152

Title OFFICER
Name FLORES, ANIBAL
Address PO BOX 524288
City-State-Zip: MIAMI FL 33152

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: LUIS JOEL VAZQUEZ

TREASURER

04/03/2016

Electronic Signature of Signing Officer/Director Detail

Date