

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000001540

**Entity Name:** NICARAGUAN CIVIC TASK FORCE, INC.

**Current Principal Place of Business:**

201 NW 109 AVE., #101  
MIAMI, FL 33172

**FILED**  
**May 05, 2015**  
**Secretary of State**  
**CC2937407789**

**Current Mailing Address:**

201 NW 109 AVE., #101  
MIAMI, FL 33172 US

**FEI Number: 20-5970279**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

NAVARRETE, CESAR A  
201 NW 109 AVE., #101  
MIAMI, FL 33172 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 C/M  
Name OROZCO, ROBERTO  
Address 201 NW 109 AVE., #101  
City-State-Zip: MIAMI FL 33172

Title V/CM  
Name USEDIA, HUMBERTO  
Address 201 NW 109 AVE., #101  
City-State-Zip: MIAMI FL 33172

Title T  
Name NAVARRETE, CESAR  
Address 201 NW 109 AVE., #101  
City-State-Zip: MIAMI FL 33172

Title D.E.  
Name CALDERA-LOPEZ, NORA  
Address 201 NW 109 AVE., #101  
City-State-Zip: MIAMI FL 33172

Title P.R.  
Name MEJIA, CLAUDIA  
Address 201 NW 109 AVE., #101  
City-State-Zip: MIAMI FL 33172

*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: NORA CALDERA-LOPEZ**

**D.E.**

**05/05/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date