### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N0500005832

Entity Name: SR. SANTO NINO SINULOG OF MIAMI, INC.

### **Current Principal Place of Business:**

20231 SW 128 COURT MIAMI, FL 33177

## **Current Mailing Address:**

20231 SW 128 COURT MIAMI, FL 33177 US

# FEI Number: 20-3015274

### Name and Address of Current Registered Agent:

SICSIC, ISABELO 20231 SW 128 COURT MIAMI, FL 33177 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	DC	Title	DVC
Name	EBO, MARLON	Name	QUINTANA, NIDA
Address	14703 SW 159 PL	Address	17433SW 143 PL
City-State-Zip:	MIAMI FL 33196	City-State-Zip:	MIAMI FL 33177
Title	DS	Title	DT
Name	VILLANUEVA, JACQUELINE	Name	GRANADA, MARCELINA
Address	7413 SW 158 PL	Address	17307 SW 140 COURT
City-State-Zip:	MIAMI FL 33193	City-State-Zip:	MIAMI FL 33177
Title	D	Title	PRESIDENT
Title Name	D SICSIC, AUGUSTUS	Title Name	PRESIDENT GULAR, JANET
	-		-
Name	SICSIC, AUGUSTUS 20231 SW 128 COURT	Name	GULAR, JANET 20171 SW 128 COURT
Name Address City-State-Zip:	SICSIC, AUGUSTUS 20231 SW 128 COURT MIAMI FL 33177	Name Address	GULAR, JANET 20171 SW 128 COURT
Name Address City-State-Zip: Title	SICSIC, AUGUSTUS 20231 SW 128 COURT MIAMI FL 33177 SECRETARY	Name Address City-State-Zip:	GULAR, JANET 20171 SW 128 COURT MIAM( FL 33177
Name Address City-State-Zip: Title Name	SICSIC, AUGUSTUS 20231 SW 128 COURT MIAMI FL 33177 SECRETARY LEE, JANIE	Name Address City-State-Zip: Title	GULAR, JANET 20171 SW 128 COURT MIAM( FL 33177 TREASURER
Name Address City-State-Zip: Title	SICSIC, AUGUSTUS 20231 SW 128 COURT MIAMI FL 33177 SECRETARY LEE, JANIE 6372 SW 30TH ST	Name Address City-State-Zip: Title Name	GULAR, JANET 20171 SW 128 COURT MIAM(FL 33177 TREASURER AMODIA, NELDA 15523 SW 41 ST

### Continues on page 2

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: JACQUELINE VILLANUEVA

DIRECTOR/ SECRETARY 02/23/2015

Electronic Signature of Signing Officer/Director Detail

# FILED Feb 23, 2015 Secretary of State CC4791627290

Date

### **Officer/Director Detail Continued :**

Title	EVENT COORDINATOR	Title	DIRECTOR
Name	HOLLIS, SOCORRO	Name	MENDOZA, CESAR
Address	20211 SW 128 COURTMIAMI	Address	6443 SW 166 COURT
City-State-Zip:	MIAMI FL 33177	City-State-Zip:	MIAMI FL 33193
Title	DIRECTOR	Title	DIRECTOR
Title Name	DIRECTOR BACULI, OPHELIA	Title Name	DIRECTOR BACULI, NARCISSO
			• . •
Name	BACULI, OPHELIA	Name	BACULI, NARCISSO