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 JOSE ARISTIZABAI	MR	02/10/2015

#### SIGNATURE: JOSE ARISTIZABAL

Electronic Signature of Signing Officer/Director Detail

ARISTIZABAL, JC 1881 NW 93 AVEI DORAL, FL 3317	NUE	
The above named e	ntity submits this statement for the purpose of changing its registered office or registered agent, or bo	
SIGNATURE:	JOSE ARISTIZABAL	
	Electronic Signature of Registered Agent	
Officer/Director Detail :		

# Name and Address of Current Registered Agent:

ARISTIZABAL, JUAN E

1881 NW 93 AVENUE

ALARCON, IVAN

1881 NW 93 AVENUE

GRAVIER. LEONARDO D

201 ALHAMBRA CIRCLE SUITE 901

**DORAL FL 33172** 

City-State-Zip: CORAL GABLES FL 33134

1881 NW 93 AVENUE DORAL, FL 33172

# **Current Mailing Address:**

1881 NW 93 AVENUE DORAL, FL 33172 US

### FEI Number: 20-5855508

D

City-State-Zip: DORAL FL 33172

D

D

Title

Title

Title

Name

Address

Name

Address

City-State-Zip:

Name

Address

oth, in the State of Florida.

Title

Title

Name

Address

Name

Address

City-State-Zip:

City-State-Zip:

D

D

ARISTIZABAL, JOSE L

1881 NW 93 AVENUE

DORAL FL 33172

COCK, CATALINA

CARRERA 32, NO. 1B SUR 51 OF 415

MEDELLIN, COLOMBIA FL 33149

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

## DOCUMENT# N0600007016

Entity Name: MI SANGRE FOUNDATION CORPORATION

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

#### FILED Feb 10, 2015 Secretary of State CC1171415773

02/10/2015 Date

Certificate of Status Desired: No

Date