

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000012250

**Entity Name:** UNION FAMILIA ESCOLAPIA CUBANA, INC.**Current Principal Place of Business:**1401 SW 102ND COURT  
MIAMI, FL 33174**Current Mailing Address:**PO BOX 522366  
MIAMI, FL 33152**FEI Number:** 20-5982368**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VALDES-COLL, FRANCISCO  
626 CORAL WAY  
1002-E  
CORAL GABLES, FL 33134-7508 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:** FRANCISCO VALDES-COLL

01/17/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT
Name	ORTEGA, CAMILO
Address	1401 SW 102ND COURT
City-State-Zip:	MIAMI FL 33174
Title	TREASURER
Name	RAIMUNDEZ, ALEJANDRO
Address	2511 SW 23 TERRACE
City-State-Zip:	MIAMI FL 33145
Title	DIRECTOR
Name	CONTRERAS, DAVID
Address	4731 W. 8TH COURT
City-State-Zip:	HIALEAH FL 33012
Title	DIRECTOR
Name	SARDINAS, JORGE
Address	17500 NW 48 AVE
City-State-Zip:	MIAMI GARDENS FL 33055

Title	VP
Name	QUIROS, DIEGO
Address	1222 SW 93RD PLACE
City-State-Zip:	MIAMI FL 33174
Title	SECRETARY
Name	LOPEZ, JUAN J
Address	13395 SW 1ST TERRACE
City-State-Zip:	MIAMI FL 33184
Title	VICE TREASURER
Name	FERNANDEZ, HECTOR
Address	9300 FONTAINEBLEAU BLVD 413
City-State-Zip:	MIAMI FL 33172
Title	VICE SECRETARY
Name	PRIETO, EMMY
Address	2193 S. LONG LAKE ROAD
City-State-Zip:	FENTON MI 48430

**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:** ALEJANDRO RAIMUNDEZ

TREASURER

01/17/2022

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title                   DIRECTOR  
Name                 HERNANDEZ, JULIO  
Address            2791 N PINE ISLAND ROAD  
                      112  
City-State-Zip:    SUNRISE FL 33322-2203

Title                   DIRECTOR  
Name                 VALDES-COLL, FRANCISCO  
Address            626 CORAL WAY  
                      1002-E  
City-State-Zip:    CORAL GABLES FL 33134-7508