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

#### DOCUMENT# N07000001481

Entity Name: ANGELS WITH A MISSION FOUNDATION INC.

## Current Principal Place of Business:

777 BRICKELL AVE STE 1201 MIAMI, FL 33131

#### **Current Mailing Address:**

1 SE 3RD AVE STE 2250 MIAMI, FL 33131

# FEI Number: 01-0887074

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

AMKE REGISTERED AGENTS, L.L.C. 2250 SUNTRUST INTERNATIONAL CENTER ONE SE THIRD AVE MIAMI, FL 33131 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

#### Officer/Director Detail :

| Title           | Ρ                     | Title           | Т                      |  |
|-----------------|-----------------------|-----------------|------------------------|--|
| Name            | FERNANDEZ, MARIANA S  | Name            | HEALY, MARIA           |  |
| Address         | 961 HARBOR DRIVE      | Address         | 430 GRAND BAY DR #1007 |  |
| City-State-Zip: | KEY BISCAYNE FL 33149 | City-State-Zip: | KEY BISCAYNE FL 33149  |  |
| Title           | VP                    | Title           | S                      |  |
| Name            | CASTILLO, MARIA       | Name            | ABALLI, PATRICIA       |  |
| Address         | 430 GRAND BAY DR #503 | Address         | 91 ISLAND DR           |  |
| City-State-Zip: | KEY BISCAYNE FL 33149 | City-State-Zip: | KEY BISCAYNE FL 33149  |  |
| Title           | VP                    |                 |                        |  |
| Name            | PRADO, MARISSA        |                 |                        |  |
| Address         | 653 HAMPTON LANE      |                 |                        |  |
|                 |                       |                 |                        |  |

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.

PRESIDENT

## SIGNATURE: MARIANA S FERNANDEZ

City-State-Zip: KEY BISCAYNE FL 33149

Electronic Signature of Signing Officer/Director Detail

# FILED Mar 28, 2015 Secretary of State CC2989743452

Certificate of Status Desired: No

Date