

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000003493

**Entity Name:** AYUDAME A VIVIR FOUNDATION, INC.

**Current Principal Place of Business:**

201 S. BISCAYNE BOULEVARD  
SUITE 800  
MIAMI, FL 33131

**Current Mailing Address:**

201 S. BISCAYNE BOULEVARD  
SUITE 800  
MIAMI, FL 33131 US

**FEI Number:** 20-8866291

**Certificate of Status Desired:** No

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

LAW CENTER OF THE AMERICAS, LLC  
201 SOUTH BISCAYNE BOULEVARD  
SUITE 800  
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

Date

**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT  
Name GUTIERREZ MAYORGA, PATRICIA  
Address C/O 201 S. BISCAYNE BOULEVARD  
SUITE 800  
City-State-Zip: MIAMI FL 33131

Title DIRECTOR, VICE-PRESIDENT  
Name LOPEZ PEREZ DE LARA, MARIANA  
Address C/O 201 S. BISCAYNE BOULEVARD  
SUITE 800  
City-State-Zip: MIAMI FL 33131

Title DIRECTOR, TREASURER  
Name RUATA BOPPEL, ALVARO  
Address C/O 201 S. BISCAYNE BOULEVARD  
SUITE 800  
City-State-Zip: MIAMI FL 33131

Title DIRECTOR, ASSISTANT SECRETARY  
Name MEYER, JAMES M  
Address 201 S. BISCAYNE BOULEVARD  
SUITE 800  
City-State-Zip: MIAMI FL 33131

Title DIRECTOR, SECRETARY  
Name PALOMO MARROQUIN, CONSUELO  
MARIA  
Address C/O 201 S. BISCAYNE BOULEVARD  
SUITE 800  
City-State-Zip: MIAMI FL 33131

*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:** JAMES M. MEYER

**DIRECTOR/ ASSISTANT  
SECRETARY**

**03/28/2016**

Electronic Signature of Signing Officer/Director Detail

Date