

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003493

Entity Name: AYUDAME A VIVIR FOUNDATION, INC.**Current Principal Place of Business:**201 S. BISCAYNE BLVD., SUITE 800
MIAMI, FL 33131**Current Mailing Address:**201 S. BISCAYNE BLVD., SUITE 800
MIAMI, FL 33131**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	DS
Name	ANTILLON, FEDERICO
Address	C/O 201 S. BISCAYNE BLVD., SUITE 800
City-State-Zip:	MIAMI FL 33131

Title	DT
Name	VALLADARES GUILLEN, LUIS F
Address	C/O 201 S. BISCAYNE BLVD., SUITE 800
City-State-Zip:	MIAMI FL 33131

Title	DPAS
Name	WYLD DE NES, JORGE A
Address	C/O 201 S. BISCAYNE BLVD., SUITE 800
City-State-Zip:	MIAMI FL 33131

Title	D
Name	GUTIERREZ, JUAN J
Address	C/O 201 S. BISCAYNE BLVD., SUITE 800
City-State-Zip:	MIAMI FL 33131

Title	D
Name	MEYER, JAMES M
Address	201 S. BISCAYNE BLVD., 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****03/14/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date