

2018 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 FLORIDA, INC.
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:** JAMES M. MEYER

04/30/2018

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, SECRETARY
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, TREASURER
Name RIVERA LAYLLE, REGINA
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. MEYERDIRECTOR, ASSISTANT
SECRETARY

04/30/2018

Electronic Signature of Signing Officer/Director Detail

Date