

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000002556

**Entity Name:** ORGANIZACION LATINO AMERICANA DE ASISTENCIA SOCIAL  
INC

**FILED**  
**Apr 24, 2021**  
**Secretary of State**  
**1510927792CC**

**Current Principal Place of Business:**

1036 BARCELONA DR  
KISSIMMEE, FL 34741

**Current Mailing Address:**

PO BOX 452138  
KISSIMMEE, FL 34745 US

**FEI Number: 26-2296852**

**Certificate of Status Desired: No**

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

LUCIANO, APOLINAR F  
136 BARCELONA DR  
KISSIMMEE, FL 34741 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:** WAGNER JIMENEZ

04/24/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name LUCIANO, APOLINAR F  
Address 136 BARCELONA DR  
City-State-Zip: KISSIMMEE FL 34741

Title VP  
Name RODRIGUEZ, ESTEBAN  
Address 152 OAKWOOD DR  
City-State-Zip: KISSIMMEE FL 34743

Title VP  
Name FERRERAS, YANIREZ  
Address 2156 CONTINENTAL STREET  
City-State-Zip: ST CLOUD FL 34769

Title TREA  
Name LUCIANO, NAPOLEON A  
Address 1545 W DONEGAN AVE APT G  
City-State-Zip: KISSIMMEE FL 34741

Title SEC  
Name GUZMAN, FATIMA  
Address 136 BARCELONA DR  
City-State-Zip: KISSIMMEE FL 34741

*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:** APOLINAR F LUCIANO

P

04/24/2021

Electronic Signature of Signing Officer/Director Detail

Date