Current Mailing Address:							
1450 NE 2ND AVENUE, SUITE 931 MIAMI, FL 33132							
FEI Number	: 61-1566768	Certificate of Status Desired: No					
Name and Address of Current Registered Agent:							
CARVALHO, AL 1450 NE 2ND A SUITE 912 MIAMI, FL 3313	VENUE						
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	ALBERTO M. CARVALHO			04/04/2018			
	Electronic Signature of Registered Agent			Date			
Officer/Director Detail :							
Title	VC	Title	CHAIRMAN				
Name	HANTMAN, PERLA TABARES	Name	CARVALHO, ALBERTO M				
Address	1450 NE 2ND AVENUE, SUITE 700	Address	1450 NE 2ND AVENUE, SUITE 91	2			
City-State-Zip:	MIAMI FL 33132	City-State-Zip:	MIAMI FL 33132				
Title	DIRECTOR	Title	SECRETARY				
Name	MUNILLA, NATACHA	Name	WILLIAMSON, JULIE A				
Address	7035 S.W. 47 STREET	Address	200 SOUTH BISCAYNE BOULEV	ARD			
City-State-Zip:	MIAMI FL 33155	City-State-Zip:	MIAMI FL 33131				
Title	TREASURER	Title	EXECUTIVE DIRECTOR				
Name	GAINEY, ALVIN	Name	DE LAS POZAS, ANN STITH				
Address	1450 NE 2ND AVENUE	Address	1450 NE 2ND AVENUE				
City-State-Zip:	MIAMI FL 33132		SUITE 931				
Title	DIRECTOR	City-State-Zip:	MIAMI FL 33132				
Name	MARCUS, DAVID L.	Title	DIRECTOR				
Address	2255 GLADES ROAD	Name	MCDOWELL, SUZAN				
	SUITE 200E	Address	38 NW 105TH STREET				
City-State-Zip:	BOCA RATON FL 33431	City-State-Zip:	MIAMI SHORES FL 33150				

## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000003277

### Entity Name: FOUNDATION FOR NEW EDUCATION INITIATIVES, INC.

## **Current Principal Place of Business:**

1450 NE 2ND AVENUE, SUITE 931 MIAMI, FL 33132

# Current Mailing Address

# Continues on page 2

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: ANN S DE LAS POZAS

04/04/2018 EXECUTIVE DIRECTOR

Electronic Signature of Signing Officer/Director Detail

## FILED Apr 04, 2018 Secretary of State CC9128513277

Date

# **Officer/Director Detail Continued :**

Title	DIRECTOR	Title	DIRECTOR
Name	PHELPS, KADISHA	Name	SALOMON, PETER E.
Address	44 W. FLAGLER STREET #1500	Address	1 SE 3RD AVENUE # 28
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131
Title	DIRECTOR		

Name SMITH, ALFRED G.

Address 200 S. BISCAYNE BLVD. # 4100

City-State-Zip: MIAMI FL 33131