

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

DOCUMENT# N09000011577

**Entity Name:** ZAMORA TERAN FOUNDATION, INC.**Current Principal Place of Business:**200 SOUTH BISCAYNE BOULEVARD  
SUITE 3550  
MIAMI, FL 33131**Current Mailing Address:**200 SOUTH BISCAYNE BOULEVARD  
SUITE 3550  
MIAMI, FL 33131**FEI Number:** 27-1419601**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FIELDSTONE, RONALD R  
200 SOUTH BISCAYNE BOULEVARD  
SUITE 3550  
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	DT
Name	ZAMORA, ROBERTO J
Address	200 SOUTH BISCAYNE BOULEVARD, SUITE 3550
City-State-Zip:	MIAMI FL 33131

Title	DP
Name	ZAMORA, MARIA J
Address	200 SOUTH BISCAYNE BOULEVARD, SUITE 3550
City-State-Zip:	MIAMI FL 33131

Title	DS
Name	ZAMORA, MARCELA
Address	200 SOUTH BISCAYNE BOULEVARD, SUITE 3550
City-State-Zip:	MIAMI FL 33131

Title	D
Name	ZAMORA, ROBERTO JR.
Address	200 SOUTH BISCAYNE BOULEVARD, SUITE 3550
City-State-Zip:	MIAMI FL 33131

Title	D
Name	ZAMORA, RODRIGO
Address	200 SOUTH BISCAYNE BOULEVARD, SUITE 3550
City-State-Zip:	MIAMI FL 33131

Title	D
Name	ZAMORA, DIEGO
Address	200 SOUTH BISCAYNE BOULEVARD, SUITE 3550
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:** ROBERTO ZAMORA**DIRECTOR****03/04/2016**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date