Electronic Signature of Signing Officer/Director Detail

# 2014 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

# 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

## **Officer/Director Detail :**

Title	DT	Title	DP	
Name	ZAMORA, ROBERTO J	Name	ZAMORA, MARIA J	
Address	200 SOUTH BISCAYNE BOULEVARD, SUITE 3550	Address	200 SOUTH BISCAYNE BOULEVARD, SUITE 3550	
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131	
Title	DS	Title	D	
Name	ZAMORA, MARCELA	Name	ZAMORA, ROBERTO JR.	
Address	200 SOUTH BISCAYNE BOULEVARD, SUITE 3550	Address	200 SOUTH BISCAYNE BOULEVARD, SUITE 3550	
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131	
Title	D	Title	D	
Name	ZAMORA, RODRIGO	Name	ZAMORA, DIEGO	
Address	200 SOUTH BISCAYNE BOULEVARD, SUITE 3550	Address	200 SOUTH BISCAYNE BOULEVARD, SUITE 3550	
City-State-Zip:	MIAMI FL 33131	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.

PRESIDENT

Date

Certificate of Status Desired: No

04/16/2014 Date