

**2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N10000007335

**Entity Name:** THE CLEO INSTITUTE INC.

**Current Principal Place of Business:**

2103 CORAL WAY  
2ND FLOOR  
MIAMI, FL 33145

**Current Mailing Address:**

2103 CORAL WAY  
2ND FLOOR  
MIAMI, FL 33145 US

**FEI Number:** 27-3185735

**Certificate of Status Desired:** No

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

CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 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 EXECUTIVE DIRECTOR  
Name ARDITI-ROCHA, YOCA  
Address 2103 CORAL WAY  
2ND FLOOR  
City-State-Zip: MIAMI FL 33145

Title PRESIDENT  
Name HOROWITZ, BERNARD  
Address 2103 CORAL WAY  
2ND FLOOR  
City-State-Zip: MIAMI FL 33145

Title DIRECTOR  
Name LEVERETT, LYNN DR.  
Address 2103 CORAL WAY  
2ND FLOOR  
City-State-Zip: MIAMI FL 33145

Title DIRECTOR  
Name WANLESS, HAROLD PHD  
Address 2103 CORAL WAY  
2ND FLOOR  
City-State-Zip: MIAMI FL 33145

Title DIRECTOR  
Name HOROWITZ, CARA  
Address 2103 CORAL WAY  
2ND FLOOR  
City-State-Zip: MIAMI FL 33145

Title VP  
Name DANIEL, DIETCH DR.  
Address 2103 CORAL WAY  
2ND FLOOR  
City-State-Zip: MIAMI FL 33145

Title DIRECTOR  
Name FREEDMAN, EDWINE  
Address 2103 CORAL WAY  
2ND FLOOR  
City-State-Zip: MIAMI FL 33145

Title DIRECTOR  
Name MORALES, JOHN  
Address 2103 CORAL WAY  
2ND FLOOR  
City-State-Zip: MIAMI FL 33145

**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:** YOCA ARDITI-ROCHA

**EXECUTIVE DIRECTOR**

**12/17/2018**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title OFFICER  
Name BAGUÉ, IRELA  
Address 2103 CORAL WAY  
2ND FLOOR  
City-State-Zip: MIAMI FL 33145

Title OFFICER  
Name PINTO, JULIET  
Address 2103 CORAL WAY  
2ND FLOOR  
City-State-Zip: MIAMI FL 33145

Title OFFICER  
Name O'CHANEY, MONICA  
Address 2103 CORAL WAY  
2ND FLOOR  
City-State-Zip: MIAMI FL 33145

Title OFFICER  
Name MARTIN, DAVID  
Address 2103 CORAL WAY  
2ND FLOOR  
City-State-Zip: MIAMI FL 33145

Title OFFICER  
Name REYNOLDS, DELANEY  
Address 2103 CORAL WAY  
2ND FLOOR  
City-State-Zip: MIAMI FL 33145

Title DIRECTOR  
Name FACELLA, MARIO  
Address 2103 CORAL WAY  
2ND FLOOR  
City-State-Zip: MIAMI FL 33145