

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000011763

Entity Name: TWIN PLUM FOUNDATION FOR AUTISTIC CURE, INC.

Current Principal Place of Business:

8105 W 20 AVE
HIALEAH, FL 33014

Current Mailing Address:

8105 W 20 AVE
HIALEAH, FL 33014

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

M & W AGENTS, INC.
2101 CORPORATE BLVD, SUITE 107
BOCA RATON, FL 33431 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 D
Name ORTIZ, HECTOR
Address 16425 COLLINS AVENUE
City-State-Zip: NORTH MIAMI BEACH FL 33160

Title D
Name ORTIZ, LINDA
Address 16425 COLLINS AVENUE
City-State-Zip: NORTH MIAMI BEACH FL 33160

Title D
Name IBANEZ-JOHNSON, LINDA S
Address 515 STONE MONT DR
City-State-Zip: WESTON FL 33326

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: HECTOR ORTIZ

D

04/12/2013

Electronic Signature of Signing Officer/Director Detail

Date