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 effe 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 the above, or on an attachment with all other like empowered.		
SIGNATURE: PABLO PERLA	PRESITENT	03/18/2015

#### SIGNATURE: PABLO PERLA

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: Electronic Signature of Registered Agent

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.

### **Officer/Director Detail :**

	Title	DP	Title	DV
	Name	LEITO, ISRAEL	Name	VERDUZCO, FILIBERTO
	Address	8101 SW 117 PATH	Address	8151 SW 117 PATH
	City-State-Zip:	MIAMI FL 33183	City-State-Zip:	MIAMI FL 33183
	Title	D		
	Title Name	D PERLA, PABLO		
	Name	PERLA, PABLO		

**Current Principal Place of Business:** 2905 NW 87TH AVE

MIAMI, FL 33172

#### **Current Mailing Address:**

PO BOX 520627 MIAMI. FL 33126

### FEI Number: 65-0237188

### Name and Address of Current Registered Agent:

PERLA, PABLO 11288 NW 51 TERRACE MIAMI, FL 33178 US

# 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: INTER-AMERICAN DIVISION PUBLISHING ASSOCIATION, INC.

## DOCUMENT# N12762

Certificate of Status Desired: Yes

FILED Mar 18, 2015 Secretary of State CC5806648034

Date

Date