

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000006608

**Entity Name:** AMERICAN IMMIGRATION FOUNDATION, INC

**Current Principal Place of Business:**

220 MIRACLE MILE  
SUITE 230  
CORAL GABLES, FL 33134

**Current Mailing Address:**

PO BOX 227294  
MIAMI, FL 33222 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

MAIRENA, JEYSSON J  
300 NW 42 AVE.  
SUITE 612  
CORAL GABLES, FL 33126 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 P  
Name RIVAS, ANDRES  
Address 220 MIRACLE MILE  
SUITE 230  
City-State-Zip: CORAL GABLES FL 33134

Title VP  
Name MAIRENA, ANA C  
Address PO BOX 143421  
City-State-Zip: CORAL GABLES FL 33126

Title SEC  
Name MAIRENA, JEYSSON J  
Address 300 NW 42 AVE  
SUITE 612  
City-State-Zip: CORAL GABLES FL 33126

*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:** ANDRES RIVAS

**PRESIDENT**

**03/22/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date