

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

DOCUMENT# N15000001141

**Entity Name:** CONCEPTO FOUNDATION INC.

**Current Principal Place of Business:**

150 SE 12TH STREET  
100  
FORT LAUDERDALE, FL 33316

**Current Mailing Address:**

150 SE 12TH STREET  
100  
FORT LAUDERDALE, FL 33316 US

**FEI Number:** 47-3020586

**Certificate of Status Desired:** No

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

MORRISON, ANDREW  
150 SE 12TH STREET  
100  
FORT LAUDERDALE, FL 33316 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 MORRISON, ANDREW  
Address 150 SE 12TH STREET, S-100  
City-State-Zip: FORT LAUDERDALE FL 33316

Title D  
Name MOLINE, ANDRES  
Address 150 SE 12TH STREET, S-100  
City-State-Zip: FORT LAUDERDALE FL 33316

Title D  
Name MOLINE, IBER  
Address 150 SE 12TH STREET, S-100  
City-State-Zip: FORT LAUDERDALE FL 33316

Title D  
Name LARRAIN, ELISA  
Address 150 SE 12TH STREET, S-100  
City-State-Zip: FORT LAUDERDALE FL 33316

*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:** ANDREW MORRISON

**PRESIDENT**

**04/26/2018**

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

\_\_\_\_\_  
Date