

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000004411

Entity Name: FUNDACION SALA MENDOZA, INC.

Current Principal Place of Business:

2701 PONCE DE LEON BLVD., STE. 202
CORAL GABLES, FL 33134

Current Mailing Address:

2701 PONCE DE LEON BLVD., STE. 202
CORAL GABLES, FL 33134

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EPGD ATTORNEYS AT LAW, P.A.
2701 PONCE DE LEON BLVD., STE. 202
CORAL GABLES, FL 33134 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 CALVO, JUAN
Address 4114 CARRIAGE DR., UNIT N4
City-State-Zip: POMPANO BEACH FL 33069

Title D
Name RUBINSTEIN, JACOBO
Address 21150 POINT PL., APT. 1506
City-State-Zip: AVENTURA FL 33180

Title D
Name FEDERICA PULIDO, ANA
Address 1078 BLUEWOOD TERR.
City-State-Zip: WESTON FL 33327

Title D
Name MENDOZA, CLEMENTINA
Address RESIDENCIAS BLANDIN ARRIBA URB COLINAS
City-State-Zip: ARRIBA PLANTA BAJA AL

Title D
Name PULIDO, PABLO
Address 2825 S. MIAMI AVE.
City-State-Zip: MIAMI FL 33129

Title D
Name PULIDO, LUISA M
Address AVENIDA PRINCIPAL UNIVERSIDAD METRO
City-State-Zip: GERMAN OTERO, PISO 2 AL

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: LUISA PULIDO

DIRECTOR

05/02/2017

Electronic Signature of Signing Officer/Director Detail

Date