

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000002947

Entity Name: AMERICAN FEDERATION OF PSYCHOANALYSIS AND
NEUROPSYCHOANALYSIS INTERGOVERNMENTAL ORGANIZATION INC,**FILED**
Mar 02, 2021
Secretary of State
0005288528CC**Current Principal Place of Business:**AV. PRIMEIRO DE MARCO 971
NOVO HAMBURGO, RS 93320-105**Current Mailing Address:**AV. PRIMEIRO DE MARCO 971
NOVO HAMBURGO, RS 93320-105 BR**FEI Number: 84-5140637****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**RODRIGUES, ANDRES SR,
200 S E 1ST STREET
S 604
MIAMI, FL 33131 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	PRESIDENT
Name	DIAS, CRISTIANA BOHN PHD,
Address	AV. PRIMEIRO DE MARCO 971
City-State-Zip:	NOVO HAMBURGO RS 93320-105

Title	VP
Name	DIAS, MARCOS VIVIANO PHD
Address	AV. PRIMEIRO DE MARCO 971
City-State-Zip:	NOVO HAMBURGO RS 93320 -105

Title	SECRETARY
Name	DIAS, CRISTIANA BOHN PHD,
Address	AV. PRIMEIRO DE MARCO 971
City-State-Zip:	NOVO HAMBURGO RS 93320 -105

Title	AMERICAN REPRESENTATIVE
Name	COHEN, ROBERTO PHD
Address	AV. PRIMEIRO DE MARCO 971
City-State-Zip:	NOVO HAMBURGO RS 93320-105

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: CRISTIANA BOHN DIAS**PRESIDENT****03/02/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date