

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48625

Entity Name: LICEO LA LUZ, INC.

Current Principal Place of Business:

124 NW 15 AVE.
MIAMI, FL 33125

Current Mailing Address:

124 NW 15 AVE.
MIAMI, FL 33125

FEI Number: 65-0343801

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FINA, AUGUSTO
5201 NW 7 ST 403 -W
MIAMI, 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 D
Name ROQUE DE ESCOBAR, MARIO
Address 3066 SW 16TH ST.
City-State-Zip: MIAMI FL 33145

Title D
Name HERNANDEZ, LOUIS
Address 6261 WEST FLAGLER ST. # 9
City-State-Zip: MIAMI FL 33144

Title D
Name PASTOR, ADALBERTO
Address 2983 SW 21ST ST.
City-State-Zip: MIAMI FL 33145

Title D
Name MEDINA, MANUEL
Address 13,700 SW 62ND ST. # 908
City-State-Zip: MIAMI FL 33183

Title SECRETARY
Name PORTUONDO, JORGE SR.
Address 124 NW 15 AVE.
City-State-Zip: MIAMI FL 33125

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: MANUEL MEDINA

D

01/20/2018

Electronic Signature of Signing Officer/Director Detail

Date