

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003633

Entity Name: FOUNDATION ORDER OF MALTA, INC.**Current Principal Place of Business:**299 ALHAMBRA CIRCLE
SUITE 321
CORAL GABLES, FL 33134**Current Mailing Address:**299 ALHAMBRA CIRCLE
SUITE 321
CORAL GABLES, FL 33134 US**FEI Number:** 65-0429382**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**O'NAGHTEN, JUAN T
2950 S.W. 27 AVENUE,
SUITE 100
MIAMI, FL 33133 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, DIRECTOR

Name O'NAGHTEN, JUAN T

Address 2950 S.W. 27 AVENUE,
SUITE 100

City-State-Zip: MIAMI FL 33133

Title DIRECTOR

Name CENTURION, JOSE J DR.

Address 299 ALHAMBRA CIRCLE
SUITE 321

City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR, SECRETARY

Name SALADRIGAS, CARLOS A.

Address 299 ALHAMBRA CIRCLE
SUITE 321

City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR, TREASURER

Name FERNANDEZ, MAURICIO

Address 299 ALHAMBRA CIRCLE
SUITE 321

City-State-Zip: CORAL GABLES FL 33134

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: JUAN T. O'NAGHTEN**PRESIDENT****02/04/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date