

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000003199

**FILED**  
**Feb 01, 2016**  
**Secretary of State**  
**CC5432760176**

**Entity Name:** THE ABRIENDO PUERTAS GOVERNING BOARD OF EAST LITTLE HAVANA, INC.

**Current Principal Place of Business:**

1401 S.W.1ST STREET  
SUITE 209  
MIAMI, FL 33135

**Current Mailing Address:**

1401 S.W.1ST STREET  
SUITE 209  
MIAMI, FL 33135 US

**FEI Number: 65-0633293**

**Certificate of Status Desired: Yes**

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

VELEZ, WANDA  
1401 S.W.1ST STREET  
SUITE 209  
MIAMI, FL 33135 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 PD  
Name VELEZ, WANDA  
Address 1401 SW1ST STREET SUITE 209  
City-State-Zip: MIAMI FL 33135

Title SD  
Name PAZ, LESBY J  
Address 1401 SW 1ST STREET SUITE 209  
City-State-Zip: MIAMI FL 33135

Title CEO  
Name DE LA TORRE, PH.D, JUAN CARLOS II  
PHD  
Address 1401 S.W.1ST STREET  
SUITE 209  
City-State-Zip: MIAMI FL 33135

Title VD  
Name BATRES, GLENDA I  
Address 1401 SW 1 STREET SUITE 209  
City-State-Zip: MIAMI FL 33135

Title TD  
Name GONZALEZ, RAUL  
Address 1401 SW 1 STREET SUITE 209  
City-State-Zip: MIAMI FL 33135

Title BOARD MEMBER  
Name ORTA, JUAN  
Address 1401 S.W.1ST STREET  
SUITE 209  
City-State-Zip: MIAMI FL 33135

Title BOARD MEMBER  
Name BUGALLO, ALDO  
Address 1401 S.W.1ST STREET  
SUITE 209  
City-State-Zip: MIAMI FL 33135

Title BOARD MEMBER  
Name ORTA, JIOVAGNA C  
Address 1401 S.W.1ST STREET  
SUITE 209  
City-State-Zip: MIAMI FL 33135

*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: DE LA TORRE, PH.D , JUAN CARLOS II , PHD**

**CEO**

**02/01/2016**

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

\_\_\_\_\_  
Date