

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004941

Entity Name: ASOCIACION MENSAJEROS DE LA PAZ, INC.**Current Principal Place of Business:**4810 ALHAMBRA CIRCLE
CORAL GABLES, FL 33146**Current Mailing Address:**4810 ALHAMBRA CIRCLE
CORAL GABLES, FL 33146 US**FEI Number:** 65-0751208**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LOPEZ-MUNOZ, MARIA ROSA P
4810 ALHAMBRA CIRCLE
CORAL GABLES, FL 33146 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	LOPEZ-MUNOZ, MARIA-ROSA P
Address	4810 ALHAMBRA CIRCLE
City-State-Zip:	CORAL GABLES FL 33146

Title	VPD
Name	FERRO-MORALES, ELOISA
Address	737 N GREENWAY DR.
City-State-Zip:	CORAL GABLES FL 33134

Title	SD
Name	DIAZ, MARIA CRISTINA
Address	10 EDGEWATER DR, APT 6E
City-State-Zip:	CORAL GABLES FL 33133

Title	TD
Name	FERRO-MENEDEZ, TERESITA
Address	3305 ALHAMBRA CIRCLE
City-State-Zip:	CORAL GABLES FL 33134

Title	PP
Name	CRISTINA, RON
Address	9 HARBOR POINT
City-State-Zip:	KEY BISCAYNE FL 33149

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: MARIA-ROSA P. LOPEZ-MUNOZ**PRESIDENT/DIRECTOR****01/23/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date