

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

DOCUMENT# N97000000842

**Entity Name:** ACTION FOR SOLIDARITY, INC.**Current Principal Place of Business:**7455 COLLINS AVE  
SUITE 209  
MIAMI BEACH, FL 33141**Current Mailing Address:**3301 NE 5TH AVE  
APT.#219  
MIAMI, FL 33137 US**FEI Number:** 65-0752133**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**PLAZA, CRISTOBAL  
3301 NE 5TH AVE  
APT.#219  
MIAMI, FL 33137 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, (STRATEGY OPERATIONS)  
Name REYNA, FELICIANO  
Address AVE ORINOCO, QTA LOS OLIVOS, BELLO MONTE  
City-State-Zip: CARACAS D.F 1050

Title COO, DIRECTOR (STRATEGY OPERATIONS-PROGRAM FOCUSED)  
Name VERGEL, NELSON  
Address 1112 JACKSON BLVD  
City-State-Zip: HOUSTON TX 77006

Title DIRECTOR, (STRATEGY OPERATIONS-PROGRAM FOCUSED)  
Name MURILLO, JORGE M.D  
Address 8740 SW 88TH ST 208  
City-State-Zip: MIAMI FL 33176

Title SECRETARY, DIRECTOR, (STRATEGY OPERATIONS)  
Name TIRADO, GEORGE  
Address 7455 COLLINS AVE SUITE 209  
City-State-Zip: MIAMI BEACH FL 33141

Title DIRECTOR, (PROGRAM FOCUSED)  
Name GRISANTI, ARMANDO  
Address AVE ORINOCO, QTA. LOS OLIVOS, BELLO MONTE  
City-State-Zip: CARACAS D.F 1050

Title VP, CEO, (STRATEGY OPERATIONS-PROGRAM FOCUSED)  
Name PLAZA, CRISTOBAL  
Address 3301 NE 5TH AVE 219  
City-State-Zip: MIAMI FL 33137

Title DIRECTOR, (STRATEGY OPERATIONS-PROGRAM FOCUSED)  
Name SILEBI, VANESSA M.D  
Address 3661 SOUTH MIAMI AVE SUITE 108  
City-State-Zip: MIAMI FL 33133

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:** CRISTOBAL PLAZA

VPCEO

04/11/2016

Electronic Signature of Signing Officer/Director Detail

Date