

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

DOCUMENT# N97000002777

**FILED**  
**Mar 09, 2016**  
**Secretary of State**  
**CC5224206877**

**Entity Name:** JAMES CORREA FOUNDATION, INC.

**Current Principal Place of Business:**

1200 NW 36TH ST.  
MIAMI, FL 33142

**Current Mailing Address:**

1200 NW 36TH ST.  
MIAMI, FL 33142 US

**FEI Number:** 65-0748309

**Certificate of Status Desired:** No

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

CORREA, MARY  
1200 NW 36TH ST.  
MIAMI, FL 33142 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:** MARY CORREA

03/09/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name CORREA, MARY  
Address 1200 NW 36TH ST.  
City-State-Zip: MIAMI FL 33142

Title VD  
Name CORREA, BOLIVAR T  
Address 4264 SW 13 TERRACE  
City-State-Zip: MIAMI FL 33134

Title TD  
Name LUCILA, GONZALEZ  
Address 14241 SW. 31 STREET  
City-State-Zip: MIAMI FL 33175

Title SD  
Name FINOCCHIARO, MARCIA  
Address 3551 SW./ 23 TERRACE  
City-State-Zip: MIAMI FL 33145

Title AUD  
Name PEINADO, MARIA DANGELES  
Address 8250 SW. 33 TERR  
City-State-Zip: MIAMI FL 33155

Title DIR  
Name NELSON, HERNANDEZ  
Address 1328 NW. 1119 AVENUE  
City-State-Zip: BOCA RATON FL 35486

Title DIR  
Name RODRIGUEZ, MARIA C  
Address 14422 SW 158 PLACE  
City-State-Zip: MIAMI FL 33196

Title DIRECTOR  
Name GARCIA, MANUEL SR.  
Address 3061 SW 133 CT  
City-State-Zip: MIAMI FL 33175

**Continues on page 2**

*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:** MARY CORREA

**PRESIDENT**

03/09/2016

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title MSS.  
Name SALGADO, MARTHA CECILIA  
Address 14422 SW 158 PLACE  
City-State-Zip: MIAMI FL 33196