2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000525

Entity Name: TROPICAL RAINFOREST FOUNDATION, INC.

FILED Aug 28, 2018 Secretary of State CC3251920060

Current Principal Place of Business:

407 LINCOLN ROAD

SUITE 302

MIAMI BEACH, FL 33139

Current Mailing Address:

407 LINCOLN ROAD SUITE 302 MIAMI BEACH, FL 33139

FEI Number: 65-0829147

Certificate of Status Desired: No

GUATEMALA CITY GUAEMALA OC

Name and Address of Current Registered Agent:

MICHAEL I GREENBERG, PA 6647 SW 65TH TERR MIAMI, FL 33143 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 Title

COOK, PETER DE PAZ. OSCAR ROBERTO Name Name

Address AV. LAS AMERICAS 18-81 ZONA 14, Address 5 AVE. 12-31 ZONA 9, EDIF. EL

COLUMBUS C CORTEZ, 4

GUATEMALA CITY, GUATEMALA OC GUATEMALA CITY, GUATEMALA OC City-State-Zip: City-State-Zip: 01015

Р Title Title D

DE PAZ, VIDA AMOR N GIRON, FIDEL Name Name

Address 5 AVE. 12-31 ZONA 9, EDIF. EL Address 3 AVENIDA 12-38 ZONA 10 805

CORTEZ. 4

City-State-Zip: City-State-Zip: GUATEMALA CITY, GUATEMALA OC 01010

01015

Title **DIRECTOR** Title **DIRECTOR**

Name DE BEAUSSET, ALEXANDER M Name YVES, JEAN

7A AVE 3-74 ZONA 9 Address Address

455 RUE DU PARVIS **EDIFICIO EL CORTEZ 4 NIVEL**

City-State-Zip: QUEBEC City-State-Zip: **GUATEMALA CITY**

Title DIRECTOR Title VP

Name AGUILAR, ALVARO Name SCHNEIDER, KURT

Address 5 AVE 12-31 ZONA 9 Address DIAGONAL 6 Y 16 AVE

EDIFICIO ATRIUM SONA 10 #1205 EDIFICIO EL CORTEZ 4 NIVEL

City-State-Zip: **GUATEMALA CITY** City-State-Zip: **GUATEMALA CITY**

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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 PAZ, VIDA AMOR N

08/28/2018

Officer/Director Detail Continued:

DIRECTOR Title

RUANO, SERGIO Name

3 AVE 38-32 ZONA 12 COLONIA EL CARMEN Address

City-State-Zip: GUATEMALA CITY