

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002444

Entity Name: ASOCIACION EMERGENCIA AYACUCHO INC.**Current Principal Place of Business:**7300 N. KENDALL DRIVE
STE. 640
MIAMI, FL 33156-7840**Current Mailing Address:**7300 N. KENDALL DRIVE
STE. 640
MIAMI, FL 33156-7840 US**FEI Number:** 65-0920961**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CEPEDA, VIOLETA
9130 SOUTH DADELAND BOULEVARD
SUITE 1607
MIAMI, FL 33156 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 OTHER, 2ND VICE PRESIDENT
Name AMOROS, CARMEN-ROSA
Address 9801 SW 73RD COURT
City-State-Zip: MIAMI FL 33156-3112

Title ASST. SECRETARY
Name MIANI, GABRIELA
Address 14660 SW 107 TERRACE
City-State-Zip: MIAMI FL 33186

Title TREASURER
Name VALS, YOLANDA
Address 17630 N.W. 62ND. PLACE
City-State-Zip: N. HIALEAH FL 33015

Title D
Name GOMEZ, MARIA SOLEDAD
Address 10615 SW 136 CT
City-State-Zip: MIAMI FL 33186

Title VP
Name CEPEDA, VIOLETA
Address 7200 S.W. 109 TERRACE
City-State-Zip: PINECREST FL 33156

Title PRESIDENT
Name PATRICIA, SCHERPELLA
Address 15405 SW 82 CT
City-State-Zip: PALMETO BAY FL 33157

Title D
Name CLAUDIA, QUINTANA
Address 405 SW 29 CT,
APT 2A
City-State-Zip: MIAMI FL 33135

Title D
Name CARMEN, TOWER
Address 7908 SW 105 PL
City-State-Zip: MIAMI FL 33173

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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: YOLANDA VALS

TREASURER

03/02/2014

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title ASST. TREASURER
Name PATRON, MARICARMEN
Address 14641 SW 83RD COURT
City-State-Zip: PALMETO BAY FL 33158

Title DIRECTOR
Name GARCIA CORROCHANO, DENISSE
Address 1155 BRICKELL BAY # 1104
City-State-Zip: MIAMI FL 33131

Title DIRECTOR
Name VARGAS, CLAUDIA
Address 17630 N.W. 62ND. PLACE
City-State-Zip: N. HIALEAH FL 33015

Title DIRECTOR
Name MOYER, IRMA
Address 15140 SW 104 STREET
APT.319
City-State-Zip: MIAMI FL 33196

Title SECRETARY
Name CARDENAS, ROSARIO
Address 15365 SW 11TH STREET
City-State-Zip: MIAMI FL 33194

Title DIRECTOR
Name DENIS, BLANCA
Address 16801 S.W. 83RD. AVENUE
City-State-Zip: PALMETO BAY FL 33157

Title DIRECTOR
Name PAREJA, CRISTINA
Address 10382 SW 212TH ST. APT. 105
City-State-Zip: CUTTLER BAY FL 33189