

2013 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	D
Name	AMOROS, CARMEN-ROSA
Address	9801 SW 73RD COURT
City-State-Zip:	MIAMI FL 33156-3112

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

Title	TD
Name	AGUAYO, SONIA
Address	9351 SW 118 PL
City-State-Zip:	MIAMI FL 33186

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

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

Title	PD
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

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: SONIA E AGUAYO**TREASURER****03/07/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date