

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006592

Entity Name: FUNDACION MANOS DEL SUR, INC.**Current Principal Place of Business:**2050 CORAL WAY
SUITE 405
MIAMI, FL 33145**Current Mailing Address:**2050 CORAL WAY
SUITE 405
MIAMI, FL 33145**FEI Number:** 65-0959520**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PIEDRA & CO
9100 SOUTH DADELAND BLVD. DATRAN ONE
SUITE 912
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 TREASURER
Name BATLLE, CLAUDIA
Address 2050 CORAL WAY
 SUITE 405
City-State-Zip: MIAMI FL 33145

Title PRESIDENT
Name BATLLE, MARIA PAULINA
Address 2050 CORAL WAY
 SUITE 405
City-State-Zip: MIAMI FL 33145

Title D
Name STAMBOULIAN, ROXANA
Address 2050 CORAL WAY
 SUITE 405
City-State-Zip: MIAMI FL 33145

Title D
Name VICTORIA, MARCOS GUILLERMO
Address 2050 CORAL WAY
 SUITE 405
City-State-Zip: MIAMI FL 33145

Title DIRECTOR
Name CIANO, PABLO
Address 2050 CORAL WAY
 SUITE 405
City-State-Zip: MIAMI FL 33145

Title DIRECTOR
Name VARGAS, ANDREA
Address 2050 CORAL WAY SUITE 405
City-State-Zip: MIAMI FL 33145

Title DIRECTOR
Name MAS, MARTIN
Address 2050 CORAL WAY
 SUITE 405
City-State-Zip: MIAMI FL 33145

Title DIRECTOR
Name CIVIDINI, JAVIER
Address 2050 CORAL WAY
 SUITE 405
City-State-Zip: MIAMI FL 33145

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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: MARIA PAULINA BATLLE**PRESIDENT****09/14/2016**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	TORRES GARCIA, MARIANO
Address	2050 CORAL WAY SUITE 405
City-State-Zip:	MIAMI FL 33145