2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000017814

Entity Name: UNIVERSIDAD AUTONOMA DEL CARIBE, INC.

Current Principal Place of Business:

7955 NW 12 ST. SUITE, 119 MIAMI, FL 33126

Current Mailing Address:

7955 NW 12 ST. SUITE, 119 MIAMI, FL 33126 US

FEI Number: 80-0573738

Name and Address of Current Registered Agent:

BARROS-RUEDA, LIGIA 7955 NW 12 ST. SUITE, 119 MIAMI, FL 33126 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	E: LIGIA BARROS-RUEDA			01/17/2017
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	TREASURER	Title	OFFICER	
Name	COLLANTE, MARIA J.	Name	RIVERA, ELECTO	
Address	7955 NW 12 ST. SUITE, 119	Address	7955 NW 12 ST. SUITE, 119	
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126	
Title	PRESIDENT	Title	т	
Name	VARGAS, RAMSES	Name	TOSSAS, EZER	
Address	7955 NW 12 ST. SUITE, 119	Address	7955 NW 12 ST. SUITE, 119	
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126	
Title	V	Title	OFFICER	
Name	MALDONADO, EFRAIN	Name	DEVIA, SANDRA	
Address	7955 NW 12 ST. SUITE, 119	Address	7955 NW 12 ST. SUITE, 119	
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126	

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: RAMSES VARGAS

Electronic Signature of Signing Officer/Director Detail

FILED Jan 17, 2017 Secretary of State CC7094453455

Certificate of Status Desired: No

01/17/2017 Date