

2016 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

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Secretary of State
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Entity Name: UNIVERSIDAD INTERAMERICANA DE PUERTO RICO, INC.

Current Principal Place of Business:

JARDINES METROPOLITANOS
399 GALILEO STREET
SAN JUAN, PUERTO RICO 00927-4518

Current Mailing Address:

P.O. BOX 363255
SAN JUAN, PUERTO RICO 00936-3255 PR

FEI Number: 66-0177776

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TORRES-CARABALLO, ANNETTE MRS.
13574 VILLAGE PARK DR.
SUITE 150
ORLANDO, FL 32837 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 CHAIRMAN, BOARD OF TRUSTEES
Name HERNANDEZ, DENNIS W
Address JARDINES METROPOLITANOS
399 GALILEO STREET
City-State-Zip: SAN JUAN 00927-4518

Title VC, BOARD OF TRUSTEES
Name PIAZZA, FELIPE
Address JARDINES METROPOLITANOS
399 GALILEO STREET
City-State-Zip: SAN JUAN 00927-4518

Title S, BOARD OF TRUSTEES
Name MOLINARY, AIDA N
Address JARDINES METROPOLITANOS
399 GALILEO STREET
City-State-Zip: SAN JUAN 00927-4518

Title TREASURER, BOARD OF TRUSTEES
Name FUENTES, JORGE L
Address JARDINES METROPOLITANOS
399 GALILEO STREET
City-State-Zip: SAN JUAN 00927-4518

Title PRESIDENT
Name FERNOS, MANUEL J ESQ.
Address JARDINES METROPOLITANOS
399 GALILEO STREET
City-State-Zip: SAN JUAN PUERTO RICO 00927-4518

Title VP, ACADEMICS
Name ECHEVARRIA, AGUSTIN ESQ.
Address JARDINES METROPOLITANOS
399 GALILEO STREET
City-State-Zip: SAN JUAN PUERTO RICO 00927-4518

Title VP, FINANCE
Name ESQUILIN, LUIS R ESQ.
Address JARDINES METROPOLITANOS
399 GALILEO STREET
City-State-Zip: SAN JUAN 00927-4518

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: LUIS R. ESQUILIN, ESQ

VP OF FINANCE

01/21/2016

Electronic Signature of Signing Officer/Director Detail

Date