

2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000002664

Entity Name: CORPORACION PARA EL FINANCIAMIENTO EMPRESARIAL DEL COMERCIO Y LAS COMUNIDADES (COFECC), CORP.**FILED**
Apr 07, 2021
Secretary of State
1396143859CC**Current Principal Place of Business:**171 CARLOS CHARDON AVE, STE 407
SAN JUAN, PR 00918**Current Mailing Address:**PO BOX 191791
SAN JUAN, PR 00919-1791 PR**FEI Number: 66-0398333****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**RIVERA, NESTOR
10460 WINWICK LANE
ORLANDO, FL 32832 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: NESTOR RIVERA****04/07/2021**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	D
Name	APONTE, JAIME
Address	THE HATO REY CENTER 268 PONCE DE LEON STE 1022
City-State-Zip:	SAN JUAN 00918
Title	D
Name	MONGE, ENID M
Address	YRB. ESTANCIAS DE SAN FERNANDO CALLE 4 A-15
City-State-Zip:	CAROLINA
Title	D
Name	RODRIGUEZ, ILDEFONSO
Address	LAS VIOLETAS CONDOMINIOS APT 404 SAGRADO CORAZON ST 459
City-State-Zip:	SAN JUAN
Title	VC, VP
Name	VEGA, HARRY O
Address	236 VIA CAMPINA VILLA CARIBE
City-State-Zip:	CAGUAS 00727-3048

Title	D
Name	CONTRERAS, OMAR M
Address	229 CALLE DEL PARQUE COND. PARQUE CENTRAL APT PH 1502
City-State-Zip:	SAN JUAN
Title	D
Name	QUINONES, SULEIRA
Address	CALLE DOMINGO GRUZ #644
City-State-Zip:	SAN JUAN 00924
Title	CP
Name	VILARO, PAUL M
Address	THE VILLAGES AT SUCHVILLE 1 SAN MIGUEL BUZON 63
City-State-Zip:	GUAYNABO 00966
Title	DS
Name	TORRES, EMILIO
Address	URB.EL VEDADO BENITO PEREZ GALDOZ #215
City-State-Zip:	HATO REY 00918

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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: PAUL VILARO**PRESIDENT BOARD OF
DIRECTORS****04/07/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DT
Name BARRERAS, RAUL O
Address PO BOX 363722
City-State-Zip: SAN JUAN 00936-3722

Title DIRECTOR
Name VELAZQUEZ, ISMAEL
Address ARENALES ALTOS WARD, ROAD 112 KM. 5.7
504 CARR. 112
City-State-Zip: ISABELA PR 00662

Title DIRECTOR
Name SANTIAGO, DIANA L.
Address 1495 AGUAS FRIAS ST.
City-State-Zip: TOA ALTA PR 00953

Title DIRECTOR
Name RIVERA, RODOLFO A.
Address PARQUE MONTEBELLO
A 11 CALLE 1
City-State-Zip: TRUJILLO ALTO PR 00976