

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000005073

**FILED**  
**Jan 17, 2012**  
**Secretary of State**

**Entity Name:** JUAN FELIPE GOMEZ ESCOBAR FOUNDATION, INC.

**Current Principal Place of Business:**

120 N PROSPECT DR  
CORAL GABLES, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

120 N PROSPECT DR  
CORAL GABLES, FL 33133

**New Mailing Address:**

**FEI Number:** 45-2406043

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COZZARELLI, TANYA  
120 N PROSPECT DR  
CORAL GABLES, FL 33133 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** COZZARELLI, TANYA  
**Address:** 120 N PROSPECT DR  
**City-St-Zip:** CORAL GABLES, FL 33133

**Title:** D  
**Name:** ESCOBAR, CATALINA  
**Address:** 120 N PROSPECT DR  
**City-St-Zip:** CORAL GABLES, FL 33133

**Title:** D  
**Name:** BENAVIDES, JUAN PABLO  
**Address:** 120 N PROSPECT DR  
**City-St-Zip:** CORAL GABLES, FL 33133

**Title:** D  
**Name:** CARBONELL, MARITZA  
**Address:** 765 CRANDON BLVD APT 101  
**City-St-Zip:** KEY BISCAYNE, FL 33149

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:** TANYA COZZARELLI

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01/17/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date