

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000010115

FILED
Apr 29, 2012
Secretary of State

Entity Name: LATIN AMERICAN INSTITUTE OF INSURANCE INC

Current Principal Place of Business:

2140 WEST FLAGLER STREET
105
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

2140 WEST FLAGLER STREET
105
MIAMI, FL 33135

New Mailing Address:

FEI Number: 20-2432609

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHARDSON, MANUEL
2140 WEST FLAGLER STREET
105
MIAMI, FL 33135 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: P
Name: RICHARDSON, MANUEL
Address: 2140 WEST FLAGLER STREET SUITE #105
City-St-Zip: MIAMI, FL 33135

Title: VP
Name: MORILLO, NESTOR
Address: 2140 WEST FLAGLER STREET SUITE # 105
City-St-Zip: MIAMI, FL 33135

Title: TES
Name: ISAAC, LUCIA
Address: 2140 WEST FLAGLER STREET
City-St-Zip: MIAMI, FL 33135

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: MANUEL RICHARDSON

PRES

04/29/2012

Electronic Signature of Signing Officer or Director

Date