

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 750070

**Entity Name:** LA PROGRESIVA ALUMNI ASSOCIATION, INC.

**Current Principal Place of Business:**

2480 NW 7 ST.  
MIAMI, FL 33125

**Current Mailing Address:**

P.O. BOX 3501057  
MIAMI, FL 33125

**FEI Number: 59-2678557**

**Certificate of Status Desired: Yes**

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

COBO, MIGUEL F  
590 NW 126 STREET  
NORTH MIAMI, FL 33168 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: MIGUEL F. COBO**

**01/05/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name CAMPOS, PLACIDO G  
Address 6950 W. 6 AVE  
City-State-Zip: HIALEAH FL 33014

Title VPD  
Name RODRIGUEZ, JULIO  
Address 850 E. 16 PL  
City-State-Zip: HIALEAH FL 33010

Title SD  
Name BOSCH, TERESITA  
Address 12501 S.W. 14 STREET #105  
City-State-Zip: PEMBROKE PINES FL 33027

Title TD  
Name COBO, MIGUEL F  
Address 590 N.W. 126 STREET  
City-State-Zip: NORTH MIAMI FL 33168

Title VICE TREASURER  
Name NOTARIO, CARLOS  
Address 451 S.W. 25 RD  
City-State-Zip: MIAMI FL 33129

*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: MIGUEL F. COBO**

**TREASURER**

**01/05/2015**

Electronic Signature of Signing Officer/Director Detail

Date