### 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: HECTOR HUGO BONARRICO

Electronic Signature of Signing Officer/Director Detail

# 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N0500006982

## Entity Name: CONCILIO APOSTOLICO INTERNATIONAL, INC

# **Current Principal Place of Business:**

2423 SW 147 AVENUE SUITE #360 MIAMI, FL 33185

#### **Current Mailing Address:**

2423 SW 147 AVENUE SUITE #360 MIAMI, FL 33185

### **FEI Number: NOT APPLICABLE**

### Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

MAYORGA, DOUGLAS I 521 SW 107 AVENUE MIAMI, FL 33174 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:

| Officer/Director Detail : |                               |                 |                               |
|---------------------------|-------------------------------|-----------------|-------------------------------|
| Title                     | PD                            | Title           | VPD                           |
| Name                      | BONARRICO, HECTOR HUGO        | Name            | MORAGAS, MAGDALENA ROSA       |
| Address                   | 2423 SW 147 AVENUE SUITE #360 | Address         | 2423 SW 147 AVENUE SUITE #360 |
| City-State-Zip:           | MIAMI FL 33185                | City-State-Zip: | MIAMI FL 33185                |
| Title                     | S                             |                 |                               |
| Name                      | MARQUES, VICTORIA             |                 |                               |
| Address                   | 5077 N.W. 7TH STREET, #518    |                 |                               |
| City-State-Zip:           | MIAMI FL 33126                |                 |                               |

01/13/2014 PRESIDENT DIRECTOR

Certificate of Status Desired: No

FILED Jan 13, 2014 Secretary of State CC4506206578

Date

Date