

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011566

Entity Name: HISPANIC FLAMENCO BALLET ENSEMBLE INC.**Current Principal Place of Business:**220 TH 71 ST
SUITE 209
MIAMI BEACH, FL 33141**Current Mailing Address:**220 TH 71 ST
SUITE 209
MIAMI BEACH, FL 33141 US**FEI Number:** 20-3871155**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MOYA, ELIGIO A
220 TH 71 ST
SUITE 209
MIAMI BEACH, FL 33141 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	CERON, JORGE
Address	835 N. SHORE DRIVE
City-State-Zip:	MIAMI BEACH FL 33141-2437

Title	VD
Name	MOYA, ELIGIO A
Address	835 N SHORE DR
City-State-Zip:	MIAMI BEACH FL 33141

Title	TD
Name	DEL RIO, IVAN
Address	220 TH 71 ST SUITE 209
City-State-Zip:	MIAMI BEACH FL 33141

Title	SD
Name	GUENTHER, PAOLA
Address	220 TH 71 ST SUITE 209
City-State-Zip:	MIAMI BEACH FL 33141

Title	ARTISTIC BOARD DIRECTOR
Name	PARDO, ESTHER
Address	220 TH 71 ST SUITE 209
City-State-Zip:	MIAMI BEACH FL 33141

Title	ARTISTIC BOARD DIRECTOR
Name	SUAREZ, EDWIN
Address	220 TH 71 ST SUITE 209
City-State-Zip:	MIAMI BEACH FL 33141

Title	ARTISTIC BOARD DIRECTOR
Name	ESCALONA, GINO
Address	220 TH 71 ST SUITE 209
City-State-Zip:	MIAMI BEACH FL 33141

Title	ARTISTIC BOARD DIRECTOR
Name	GARCIA, JOHELIN
Address	220 TH 71 ST SUITE 209
City-State-Zip:	MIAMI BEACH FL 33141

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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: JORGE CERON**DIRECTOR****02/24/2015**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	OFFICER
Name	DEL RIO, IVAN ELI JR.
Address	11846 NW 13TH ST
City-State-Zip:	PEMBROKE PINES FL 33026