

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000006111

**Entity Name:** DIAGRAMA FOUNDATION - PSYCHOSOCIAL INTERVENTION, INC.**FILED**  
**Jun 26, 2020**  
**Secretary of State**  
**1351293014CC****Current Principal Place of Business:**AVENIDA CIUDAD DE ALMERIA 10  
MURCIA SPAIN, SP 30002**Current Mailing Address:**AVENIDA CIUDAD DE ALMERIA 10  
MURCIA SPAIN, SP 30002 SP**FEI Number: 46-0523133****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** MICHELE HOLDEN, ASSISTANT SECRETARY**06/26/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DP
Name	CERVANTES, FRANCISCO LEGAZ MR.
Address	AVENIDA CIUDAD DE ALMERIA 10
City-State-Zip:	MURCIA SPAIN AL 30002

Title	D
Name	SARRION, ELISA MORAGA MRS
Address	EDIFICIO ESMERALDA 1 ERO 3A
City-State-Zip:	30380 LA MANGA CARTAGENA SP 30380

Title	D
Name	LORENTE, CARIDAD MORENO MRS
Address	CALLE FERNANDO DODERO, N 14 BAJO
City-State-Zip:	30368 CARTAGENA SP 30368

*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:** FRANCISCO LEGAZ CERVANTES**DIRECTOR****06/26/2020**

Electronic Signature of Signing Officer/Director Detail

Date