

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000011115

**Entity Name:** ASSOCIATION OF FOREIGN LANGUAGE TEACHERS OF DADE COUNTY CORP.

**FILED**  
**Jan 12, 2014**  
**Secretary of State**  
**CC0582859473**

**Current Principal Place of Business:**

5035 SW 140 CT.  
MIAMI, FL 33175

**Current Mailing Address:**

5035 SW 140 CT.  
MIAMI, FL 33175

**FEI Number: 56-2549982**

**Certificate of Status Desired: No**

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

SIERRA, MARIA  
5035 SW 140 CT.  
MIAMI, FL 33175 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 PAST PRESIDENT  
Name MONTESERRAT, CONCEPCION  
Address 10800 SW 88 AVE.  
City-State-Zip: MIAMI FL 33176

Title D  
Name CARBALLO, EDUARDO  
Address 819 MONTEREY ST.  
City-State-Zip: CORAL GABLES FL 33134

Title T  
Name SIERRA, MARIA  
Address 5035 SW 140 CT.  
City-State-Zip: MIAMI FL 33175

Title S  
Name GOLDENBERG, DULCE  
Address 755 NW 29 AVE  
City-State-Zip: MIAMI FL 33125

Title PRESIDENT  
Name ARANA, EMMA  
Address 1260 S. AUDUBON DR.  
City-State-Zip: HOMESTEAD FL 33157

*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: MARIA SIERRA**

**TREASURY**

**01/12/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date