

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000001182

**FILED**  
**Apr 08, 2019**  
**Secretary of State**  
**2959423606CC**

**Entity Name:** LATIN AMERICA INDUSTRIAL ASSOCIATION INC.

**Current Principal Place of Business:**

1600 PONCE DE LEON BLVD.  
SUITE 1000 #74  
CORAL GABLES, FL 33134

**Current Mailing Address:**

1600 PONCE DE LEON BLVD.  
SUITE 1000 #74  
CORAL GABLES, FL 33134

**FEI Number:** 27-2955666

**Certificate of Status Desired:** Yes

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

CALVO, JUAN J  
4114 CARRIAGE DRIVE  
N-4  
POMPANO BEACH, FL 33069 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 DIRECTOR  
Name KRONFLE, HENRY K  
Address CENTRO EMPRESARIAL LAS  
CAMARAS PISO 5  
City-State-Zip: GUAYAQUIL ECUADOR

Title SECOND VP  
Name COSTA, CATERINA  
Address FEDERACION NACIONAL DE  
CAMARAS DE INDUSTRIAS DEL  
ECUADOR  
FNCIE  
City-State-Zip: GUAYAQUIL ECUADOR

Title DIRECTOR  
Name LOPEZ FERNANDEZ, FERNANDO  
Address CAMARA DE INDUSTRIA DE  
GUATEMALA  
City-State-Zip: GUATEMALA

Title PRESIDENT  
Name HERRERA VEGA, MANUEL  
Address MANUEL MARIA CONTRERAS 133  
PISO 8  
City-State-Zip: COL. CUAHTEMOC, MEXICO CITY  
06500

Title FIRST VP  
Name OLAIZAGA, JUAN PABLO  
Address AVENIDA PRINCIPAL DE CHUAO  
EDIFICIO CONINDUSTRIA  
City-State-Zip: CARACAS 1061

Title EXECUTIVE SECRETARY  
Name GOMEZ, RICARDO  
Address MANUEL MARIA CONTRERAS 133  
COLONIA CUAHTEMOC PISO 8  
City-State-Zip: MEXICO CITY DF 06500

Title THIRD VP  
Name EGLOFF, ENRIQUE  
Address FECAICA  
FEDERACION DE CAMARAS Y  
ASOCIACIONES DE INDUSTRIA DE  
CENTRO AMERICA Y REPUBLICA  
DOMINICANA  
City-State-Zip: SAN JOSE

*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:** JUAN J CALVO CALVO

**REGISTERED AGENT**

**04/08/2019**

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