

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000003242

**FILED**  
**Apr 08, 2016**  
**Secretary of State**  
**CC1370010666**

**Entity Name:** PEDRO J. AND DINA E. ACEVEDO'S FOUNDATION, CORP.

**Current Principal Place of Business:**

5785 W 17 AVENUE  
HIALEAH, FL 33012

**Current Mailing Address:**

P.O BOX 170838  
HIALEAH, FL 33017

**FEI Number: 30-0836467**

**Certificate of Status Desired: Yes**

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

CASTILLO, ESTHER  
5785 W 17 AVENUE  
HIALEAH, FL 33012 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 P  
Name CASTILLO, ESTHER  
Address 5785 W 17TH AVENUE  
City-State-Zip: HIALEAH FL 33012

Title DIR.  
Name CASTILLO, JUAN  
Address 13379 SW 30 STREET  
City-State-Zip: MIAMI FL 33175

Title VP  
Name VALENZUELA, DIANNA  
Address 3570 W 88 TERRACE  
City-State-Zip: HIALEAH FL 33018

Title CFO  
Name CASTILLO, CESAR S.  
Address 1841 SW CYCLE STREET  
City-State-Zip: PORT SAINT LUCIE FL 34953

Title PASTOR  
Name FERNANDEZ, NELSON A. SR.  
Address 203 SW 7TH TERRACE  
City-State-Zip: HALLANDALE BEACH FL 33175

*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: ESTHER CASTILLO**

**PRESIDENT**

**04/08/2016**

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

\_\_\_\_\_  
Date