

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

DOCUMENT# N14000001612

**Entity Name:** JOSE MARTI PLAZA RESIDENT COUNCIL, INC.

**Current Principal Place of Business:**

154 SW 17 AVE #210  
MIAMI, FL 33135

**FILED**  
**Apr 19, 2016**  
**Secretary of State**  
**CC5760089016**

**Current Mailing Address:**

154 SW 17 AVE #210  
MIAMI, FL 33135

**FEI Number: 74-3239279**

**Certificate of Status Desired: Yes**

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

ESTRADA, JOAQUIN  
154 SW 17 AVE #210  
MIAMI, FL 33135 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 ESTRADA, JOAQUIN  
Address 154 SW 17 AVE #210  
City-State-Zip: MIAMI FL 33135

Title S  
Name SILVA, GLADYS  
Address 154 SW 17 AVE #210  
City-State-Zip: MIAMI FL 33135

Title VP  
Name BETANCOURT, RAFAEL  
Address 154 SW 17 AVE #210  
City-State-Zip: MIAMI FL 33135

Title S  
Name PRADO, ROSA  
Address 154 SW 17 AVE #210  
City-State-Zip: MIAMI FL 33135

Title T  
Name LEAL, MARIA C  
Address 154 SW 17 AVE #210  
City-State-Zip: MIAMI FL 33135

*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: JOAQUIN ESTRADA**

**PRESIDENT**

**04/19/2016**

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

\_\_\_\_\_  
Date