

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

DOCUMENT# N15000011254

**Entity Name:** AMOR SIN FRONTERAS, INC.**Current Principal Place of Business:**20900 NE 30TH AVE, 8TH FLOOR  
AVENTURA, FL 33180**Current Mailing Address:**20900 NE 30TH AVE, 8TH FLOOR  
AVENTURA, FL 33180 US**FEI Number:** 47-5493203**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENTS, INC.  
3030 N. ROCKY POINT DR  
STE 150A  
TAMPA, FL 33607 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            PRESIDENT  
Name            OROZCO, DENIS  
Address        20900 NE 30TH AVE, 8TH FLOOR  
City-State-Zip: AVENTURA FL 33180

Title            VP  
Name            MARCH, SYDNEY  
Address        20900 NE 30TH AVE, 8TH FLOOR  
City-State-Zip: AVENTURA FL 33180

Title            SECRETARY  
Name            FERNANDEZ, CLAUDIO  
Address        20900 NE 30TH AVE, 8TH FLOOR  
City-State-Zip: AVENTURA FL 33180

Title            DIRECTOR  
Name            PIDGEON, MARIA  
Address        20900 NE 30TH AVE, 8TH FLOOR  
City-State-Zip: AVENTURA FL 33180

Title            TREASURER  
Name            MARCH, NANCY  
Address        20900 NE 30TH AVE, 8TH FLOOR  
City-State-Zip: AVENTURA FL 33180

Title            DIRECTOR  
Name            ABELLO, CLAUDIA  
Address        20900 NE 30TH AVE, 8TH FLOOR  
City-State-Zip: AVENTURA FL 33180

Title            DIRECTOR  
Name            GAONA, CLAUDIA  
Address        20900 NE 30TH AVE, 8TH FLOOR  
City-State-Zip: AVENTURA FL 33180

Title            DIRECTOR  
Name            BOBADILLA, SERGIO  
Address        20900 NE 30TH AVE, 8TH FLOOR  
City-State-Zip: AVENTURA FL 33180

**Continues on page 2**

*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:** DENIS OROZCO

PRESIDENT

03/31/2016

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

|                 |                              |
|-----------------|------------------------------|
| Title           | DIRECTOR                     |
| Name            | OROZCO, AHYDE                |
| Address         | 20900 NE 30TH AVE, 8TH FLOOR |
| City-State-Zip: | AVENTURA FL 33180            |