

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35207

Entity Name: METRO TRAFFIC SAFETY INSTITUTE, INC.**Current Principal Place of Business:**7500 N.W. 25 STREET, SUITE 119
MIAMI, FL 33122**Current Mailing Address:**7500 N.W. 25 STREET, SUITE 119
MIAMI, FL 33122**FEI Number: 65-0158313****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LOPEZ, ANTHONY
7500 NW 25TH STREET, SUITE 119
MIAMI, FL 33122 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	D
Name	RODRIGUEZ, RITA
Address	7500 N.W. 25 STREET, SUITE 119
City-State-Zip:	MIAMI FL 33122

Title	D
Name	DOMINGUEZ, VIOLET
Address	7500 N.W. 25 STREET, SUITE 119
City-State-Zip:	MIAMI FL 33122

Title	CD
Name	HERNANDEZ, DENISE B
Address	7500 N.W. 25 STREET, SUITE 119
City-State-Zip:	MIAMI FL 33122

Title	D
Name	HERNANDEZ, LUIS
Address	7500 N.W. 25 STREET, SUITE 119
City-State-Zip:	MIAMI FL 33122

Title	D
Name	DEZENDEGUI, GUSTAVO
Address	7500 N.W. 25 STREET, SUITE 119
City-State-Zip:	MIAMI FL 33122

Title	EXECUTIVE DIRECTOR
Name	LOPEZ, ANTHONY
Address	7500 N.W. 25 STREET, SUITE 119
City-State-Zip:	MIAMI FL 33122

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: ANTHONY LOPEZ**EX DIRECTOR****03/07/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date