

**2018 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 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

**ED**

**01/22/2018**

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

\_\_\_\_\_  
Date