

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000002553

**Entity Name:** ASAMBLEA PROVINCIAL DE ORIENTE EN EL EXILIO, INC.

**Current Principal Place of Business:**

14516 SW 107 TERRACE  
MIAMI, FL 33186

**Current Mailing Address:**

14516 SW 107 TERRACE  
MIAMI, FL 33186 US

**FEI Number:** 65-0682698

**Certificate of Status Desired:** No

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

RAMOS, ROLANDO  
5201 N.W. 7 STREET  
MIAMI, FL 33175 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 DP  
Name MARTIN, CATALINA  
Address 925 N.W. 7 STREET ROAD  
City-State-Zip: MIAMI FL 33136

Title DV  
Name MESA, ABEL  
Address 23925 S.W. 108 CT.  
City-State-Zip: MIAMI FL 33132

Title S  
Name RODRIGUEZ, RAMON  
Address 9888 FOUNTAINEBLEU BLVD  
City-State-Zip: MIAMI FL 33155

Title DT  
Name MULET, ALBERTO  
Address 14516 SW 107 TERRACE  
City-State-Zip: MIAMI FL 33186

Title D  
Name NUNEZ, FRANCISCO  
Address 3631 S.W. 105 COURT  
City-State-Zip: MIAMI FL 33165

Title D  
Name RAMOS, MIGUEL  
Address 5201 N.W. 7 STREET # 516 W  
City-State-Zip: MIAMI FL 33126

*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:** MULET,ALBERTO

**TREASURY**

**04/10/2014**

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

\_\_\_\_\_  
Date