

2023 FOREIGN NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000007507

Entity Name: UNIVERSIDAD INTERAMERICANA DE PUERTO RICO, INC.

FILED
Oct 16, 2023
Secretary of State
9889841413CR

Current Principal Place of Business:

JARDINES METROPOLITANOS
399 GALILEO STREET
SAN JUAN, PUERTO RICO 00927-4518

Current Mailing Address:

P.O. BOX 363255
SAN JUAN, PUERTO RICO 00936-3255 PR

FEI Number: 66-0177776

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SANTIAGO, LUIS S
13574 VILLAGE PARK DR. SUITE 150
ORLANDO, FL 32837 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: LUIS SANTIAGO

10/16/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title BOARD OF TRUSTEES, VP
Name ALVAREZ, ELIEZER
Address JARDINES METROPOLITANOS
399 GALILEO STREET
City-State-Zip: SAN JUAN 00927-4518

Title BOARD OF TRUSTEES, SECRETARY
Name VELEZ, MARCELINA
Address JARDINES METROPOLITANOS
399 GALILEO STREET
City-State-Zip: SAN JUAN 00927-4518

Title TREASURER, BOARD OF TRUSTEES
Name LIZARDI, SAMUEL
Address JARDINES METROPOLITANOS
399 GALILEO STREET
City-State-Zip: SAN JUAN 00927-4518

Title BOARD OF TRUSTEES, PRESIDENT
Name MAS, DOMINGO
Address JARDINES METROPOLITANOS
399 GALILEO STREET
City-State-Zip: SAN JUAN 00927-4518

Title PRESIDENT
Name RAMIREZ-RIVERA, RAFAEL
Address JARDINES METROPOLITANOS
399 GALILEO STREET
City-State-Zip: SAN JUAN 00927-4518

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: RAFAEL RAMIREZ-RIVERA

PRESIDENT

10/16/2023

Electronic Signature of Signing Officer/Director Detail

Date