

**2023 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F18000005842

**FILED**  
**Feb 26, 2023**  
**Secretary of State**  
**4558540112CC**

**Entity Name:** ASOCIACION CIVIL OBSERVATORIO DE INVESTIGACIONES SOCIALES EN FRONTERA INC

**Current Principal Place of Business:**

AV LAS PILAS CASA 270  
SAN CRISTOBAL, TACHIRA  
VENEZUELA 5001,

**Current Mailing Address:**

3540 SOUTH OCEAN BLVD  
APT 211  
SOUTH PALM BEACH, FL 33480 US

**FEI Number: 61-1913218**

**Certificate of Status Desired: No**

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

MAZUERA, LINA  
3540 SOUTH OCEAN BLVD  
APT 211  
SOUTH PALM BEACH, FL 33480 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 P  
Name MAZUERA ARIAS, RINA  
Address AV LAS PILAS CASA 270  
City-State-Zip: VENEZUELA 5001

Title VP  
Name RAMIREZ GARCIA, CARLOS V  
Address AV LAS PILAS CASA 270  
City-State-Zip: VENEZUELA 5001

Title VP  
Name RAMIREZ MAZUERA, CARLOS E  
Address AV LAS PILAS CASA 270  
City-State-Zip: VENEZUELA 5001

*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: RINA MAZUERA ARIAS**

**DIRECTOR**

**02/26/2023**

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

\_\_\_\_\_  
Date