2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0800000542

Entity Name: THE ICLA DASILVA FOUNDATION INC.

Current Principal Place of Business:

11-49 47TH AVENUE 2ND FLOOR LONG ISLAND CITY, NY 11101

Current Mailing Address:

11-49 47TH AVENUE 2ND FLOOR LONG ISLAND CITY, NY 11101

FEI Number: 13-3677332

Name and Address of Current Registered Agent:

WESLEY, CARLOS JR. 21195 HELMSMAN DRIVE/ F-13 AVENTURA, FL 33180 US Certificate of Status Desired: Yes

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:

Address City-State-Zip: Electronic Signature of Registered Agent

Officer/Director Detail :

	Title	CHAIRMAN	Title	DIRECTOR
	Name	WUERTELE, ANDREW	Name	HIGHT, NORTON
	Address	333 E 55TH STREET	Address	118 EAST 60TH STREET, APT # 23C
	City-State-Zip:	NEW YORK NY 10022	City-State-Zip:	NEW YORK NY 10022
	Title	PRESIDENT	Title	SECRETARY
	Name	DA SILVA, AIRAM	Name	KALA, MAXYM
	Address	595 MAIN STREET APT 1215	Address	34-22 28TH STREET, APT. 3F
	City-State-Zip:	NEW YORK NY 10044	City-State-Zip:	NEW YORK NY 11106
	Title	TREASURER	Title	DIRECTOR
	Name	ITSKOWITCH, LAWRENCE	Name	TICHAUER, RENATO
	Address	531 MAIN STREET	Address	250 E 65TH STREET, APT. 9H
	City-State-Zip:	NEW YORK NY 10044	City-State-Zip:	NEW YORK NY 10021
	Title	VC		
	Name	AUSTIN, SHAWN		

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: AIRAM DA SILVA

95 MAPLE STREET

BROOKLYN NY 11225

PRESIDENT

01/21/2015

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jan 21, 2015 Secretary of State CC9854643532