

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 722107

**Entity Name:** VENICE ISLE INC.

**Current Principal Place of Business:**

3536 N.E. 168 ST  
NORTH MIAMI BEACH, FL 33160

**Current Mailing Address:**

3536 N.E. 168 ST  
OFFICE MAIL BOX  
NORTH MIAMI BEACH, FL 33160 US

**FEI Number:** 59-1476675

**Certificate of Status Desired:** No

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

DITOMMASO, ANNETTE  
3536 NE 168 ST  
OFFICE MAIL BOX  
NORTH MIAMI BEACH, FL 33160 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:** ANNETTE DITOMMASO

05/02/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            VELTCHEV, SVETOSLAV  
Address        3536 N.E. 168 ST  
                  OFFICE MAIL BOX  
City-State-Zip: NORTH MIAMI BEACH FL 33160

Title            DIRECTOR  
Name            CADY, RHETT  
Address        3536 N.E. 168 ST  
                  OFFICE MAIL BOX  
City-State-Zip: NORTH MIAMI BEACH FL 33160

Title            DIRECTOR  
Name            HUXLEY, ROBERT  
Address        3536 N.E. 168 ST  
                  OFFICE MAIL BOX  
City-State-Zip: NORTH MIAMI BEACH FL 33160

Title            VP  
Name            SILVA, ISAAC  
Address        3536 N.E. 168 ST  
                  OFFICE MAIL BOX  
City-State-Zip: NORTH MIAMI BEACH FL 33160

Title            TREASURER  
Name            BESSUDNOVA, OLGA  
Address        3536 N.E. 168 ST  
                  OFFICE MAIL BOX  
City-State-Zip: NORTH MIAMI BEACH FL 33160

Title            SECRETARY  
Name            MCARDLE, PETER  
Address        3536 N.E. 168 ST  
                  OFFICE MAIL BOX  
City-State-Zip: NORTH MIAMI BEACH FL 33160

Title            ASST. SECRETARY  
Name            VALBUENA, GLADYS  
Address        3536 N.E. 168 ST  
                  OFFICE MAIL BOX  
City-State-Zip: NORTH MIAMI BEACH FL 33160

*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:** SVETOSLAV VELTCHEV

PRESIDENT

05/02/2022

Electronic Signature of Signing Officer/Director Detail

Date