2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743454

Entity Name: ANTHONY R. ABRAHAM FOUNDATION, INC.

Current Principal Place of Business:

6150 SW 76 STREET 2ND FLOOR SUITE B MIAMI, FL 33143

Current Mailing Address:

6150 SW 76 STREET 2ND FLOOR SUITE B MIAMI, FL 33143 US

FEI Number: 59-1837290

Name and Address of Current Registered Agent:

TONARELLI, SARA 6150 SW 76 STREET 2ND FLOOR SUITE B MIAMI, FL 33143 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 | SARA TONARELLI | | | 01/29/2024 |
|-----------------|--|-----------------|-----------------------|------------|
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Direc | ctor Detail : | | | |
| Title | Ρ | Title | VPD | |
| Name | ABRAHAM, THOMAS G | Name | ABRAHAM, THOMAS G | |
| Address | 155 SOLANO PRADO | Address | 155 SOLANO PRADO | |
| City-State-Zip: | CORAL GABLES FL 33156 | City-State-Zip: | CORAL GABLES FL 33156 | |
| Title | SD | Title | D | |
| Name | MALOUF, THOMAS H | Name | ABRAHAM, NORMA J | |
| Address | 3115 MOSS VALE LANE | Address | 4891 S.W. 76 STREET | |
| City-State-Zip: | TAMPA FL 33618 | City-State-Zip: | MIAMI FL 33143 | |
| Title | D | | | |
| Name | DANIELS, NICHOLAS M | | | |
| Address | ONE S.E. THIRD AVE. #2950 | | | |
| City-State-Zip: | MIAMI FL 33131 | | | |
| | | | | |

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: THOMAS G. ABRAHAM

PRESIDENT

01/29/2024

Electronic Signature of Signing Officer/Director Detail

FILED Jan 29, 2024 Secretary of State 5097363205CC

Certificate of Status Desired: Yes

Date