

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

DOCUMENT# N00000007609

**Entity Name:** S.T.E.P.S. IN THE RIGHT DIRECTION, INC.

**Current Principal Place of Business:**

17670 NW 78 AVENUE  
STE 205  
MIAMI, FL 33015

**Current Mailing Address:**

6363 GAGE PLACE  
MIAMI LAKES, FL 33014 US

**FEI Number:** 65-1067093

**Certificate of Status Desired:** No

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

SALEM, MICHAEL  
17670 NW 78 AVENUE  
205  
MIAMI, FL 33015 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	PRESIDENT	Title	DIRECTOR, SECRETARY
Name	SALEM, MICHAEL	Name	CANELA, JANELL
Address	17670 NW 78 AVENUE STE 205	Address	17670 NW 78 AVENUE STE 205
City-State-Zip:	MIAMI FL 33015	City-State-Zip:	MIAMI FL 33015
Title	DIRECTOR	Title	VP, CEO
Name	WATSON, DARLENE	Name	SALEM, BARBARA
Address	17670 NW 78 AVENUE 205	Address	17670 NW 78 AVENUE STE 205
City-State-Zip:	MIAMI FL 33015	City-State-Zip:	MIAMI FL 33015
Title	DIRECTOR, TREASURER		
Name	WIX, DOROTHY		
Address	17670 NW 78 AVENUE 205		
City-State-Zip:	MIAMI FL 33015		

*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:** MICHAEL SALEM

**PRESIDENT**

**03/13/2023**

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

\_\_\_\_\_  
Date