

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008544

Entity Name: CENTRAL FLORIDA BRAZILIAN-AMERICAN CHAMBER OF COMMERCE, INC.**FILED**
Jan 27, 2023
Secretary of State
0128544112CC**Current Principal Place of Business:**2295 S. HIAWASSEE ROAD
SUITE 104
ORLANDO, FL 32835**Current Mailing Address:**2295 S. HIAWASSEE ROAD
SUITE 104
ORLANDO, FL 32835 US**FEI Number: 59-3694145****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SA FINANCE & ACCOUNTING INC
5728 MAJOR BLVD
SUITE 309
ORLANDO, FL 32819 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:** CAROL SOUSA

01/27/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name ALEVATO, MARCO
Address 2295 S. HIAWASSEE ROAD
 SUITE 104
City-State-Zip: ORLANDO FL 32835

Title VP
Name SOUSA NEIVA, MARIA CAROLINA
Address 2295 S. HIAWASSEE ROAD
 SUITE 104
City-State-Zip: ORLANDO FL 32835

Title DIRECTOR
Name CORREA, PAULO
Address 2295 S. HIAWASSEE ROAD
 SUITE 104
City-State-Zip: ORLANDO FL 32835

Title DIRECTOR
Name GONCALVES , MARCELO
Address 2295 S. HIAWASSEE ROAD
 SUITE 104
City-State-Zip: ORLANDO FL 32835

Title TREASURER
Name DASILVA, UDSON
Address 2295 S HIAWASSEE RD
 SUITE 104
City-State-Zip: ORLANDO FL 32819

Title DIRECTOR
Name NOBREGA, PRISCILA
Address 2295 S. HIAWASSEE ROAD
 SUITE 104
City-State-Zip: ORLANDO FL 32835

Title DIRECTOR
Name ESPI, CAROLINE
Address 2295 S. HIAWASSEE ROAD
 SUITE 104
City-State-Zip: ORLANDO FL 32835

Title DIRECTOR
Name ALMEIDA, ANDREA
Address 2295 S. HIAWASSEE ROAD
 SUITE 104
City-State-Zip: ORLANDO FL 32835

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: MARIA CAROLINA SOUSA NEIVA

VP

01/27/2023

Electronic Signature of Signing Officer/Director Detail

Date