# 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: FLORA RAY

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## Current Principal Place of Business:

12895 SW 132 STREET 103 MIAMI, FL 33186-7201

ASSOCIATION, INC.

DOCUMENT# N01337

### **Current Mailing Address:**

12895 S W 132 STREET 103 MIAMI, FL 33186-7201 US

#### FEI Number: 59-2431866

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

RAY, FLORA M 825 N E 199 ST 107 MIAMI, FL 33179 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

Officer/Director Detail :			
Title	Р	Title	VP
Name	FORD, PATRICIA	Name	RAY, FLORA
Address	825 N E 199 ST 102	Address	825 NE 199
City-State-Zip:	MIAMI FL 33179	City-State-Zip:	MIAMI FL 33179
Title	Т	Title	S
		Name Address	VALENCIA, ENID
Name Address	KLEIN, MINDY 825 N E 199 ST #204		825 N E 199TH STREET 108
City-State-Zip:	MIAMI FL 33179	City-State-Zip:	MIAMI FL 33179
Title	DIRECTOR		
Name	ALI, HAZNAZ		
Address	825 N E 199TH STREET 204		
City-State-Zip:	MIAMI FL 33179		

Certificate of Status Desired: No

FILED Feb 02, 2019 Secretary of State 3605001914CC

Date

VP