

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000003137

**Entity Name:** ALHAMBRA HEIGHTS RESIDENTIAL FORCE, INC.

**Current Principal Place of Business:**

1195 NW 124TH STREET  
NORTH MIAMI, FL 33168

**Current Mailing Address:**

1195 NW 124TH STREET  
NORTH MIAMI, FL 33168 US

**FEI Number:** 71-0922146

**Certificate of Status Desired:** Yes

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

HILTON, BEVERLY  
1195 NW 124TH STREET  
NORTH MIAMI, FL 33168 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            OWNER/PRESIDENT & CEO  
Name            BEVERLY, HILTON  
Address        P.O BOX 681173  
City-State-Zip: N MIAMI FL 33168

Title            OWNER/PRESIDENT & CEO  
Name            HILTON, BEVERLY  
Address        1195 NW 124TH STREET  
City-State-Zip: NORTH MIAMI FL 33168

Title            T, TREASURER  
Name            ADELY, BELIZAIRE  
Address        P. O BOX 681173  
City-State-Zip: NORTH MIAMI FL 33168

Title            VICE, VP  
Name            SCOTT, PHILLIP  
Address        1155 NW 124TH STREET  
City-State-Zip: NORTH MIAMI FL 33168

*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: BEVERLY HILTON**

**PRESIDENT**

**03/09/2024**

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

\_\_\_\_\_  
Date