#### 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008864

Entity Name: HOUSING AND ASSISTIVE TECHNOLOGY, INC.

FILED Feb 22, 2021 Secretary of State 5879623913CC

# **Current Principal Place of Business:**

2000 TOWERSIDE TERRACE SUITE 505

MIAMI, FL 33138

## **Current Mailing Address:**

2000 TOWERSIDE TERRACE, #505 MIAMI, FL 33138

FEI Number: 04-3777501 Certificate of Status Desired: Yes

### Name and Address of Current Registered Agent:

KOFSKY, BETH J 2000 TOWERSIDE TERRACE #505 MIAMI, FL 33138 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 D, Title D

NameFARRAN, JR., VICTORNameOSTROWSKI, DALEAddress8141 NW 47TH COURTAddress126 NW 104 STREETCity-State-Zip:LAUDERHILL FL 33351City-State-Zip:MIAMI FL 33150

Title D Title I

Name PRIME, CARL L Name CHEUNG, MARILYN

Address 209 FLORIDA AVENUE Address 9610 E CALUSA CLUB DRIVE

City-State-Zip: CORAL GABLES FL 33131 City-State-Zip: MIAMI FL 33186

Title D Title

NameCESARANO, MICHAELNameDU PRE, ELLYAddress6970 SUNSET DRIVEAddress1641 NW 2ND AVE

City-State-Zip: MIAMI FL 33143 City-State-Zip: FT. LAUDERDALE FL 33311

Title PRESIDENT
Name KOFSKY, BETH J

Address 2000 TOWERSIDE TERRACE, #505

City-State-Zip: MIAMI FL 33138

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: BETH KOFSKY EXE

Electronic Signature of Signing Officer/Director Detail

EXECUTIVE DIRECTOR 02/22/2021

Date