

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000010231

**Entity Name:** THE CHRISTOPHER RICARDO CYSTIC FIBROSIS FOUNDATION, INC.

**FILED**  
**Feb 05, 2019**  
**Secretary of State**  
**4190524876CC**

**Current Principal Place of Business:**

3191 NE 211 TERRACE  
AVENTURA, FL 33180

**Current Mailing Address:**

3191 NE 211 TERRACE  
AVENTURA, FL 33180

**FEI Number: 86-1119987**

**Certificate of Status Desired: No**

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

DEVITA, ANTONIO  
19333 COLLINS AVE  
709  
SUNNY ISLES BEACH, FL 33160 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: ANTONIO DEVITA**

**02/05/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	D	Title	D
Name	RICARDO, MARIA	Name	DEVITA, ZITA ZANOTTI
Address	3191 NE 211 TERRACE	Address	3191 NE 211 TERRACE
City-State-Zip:	AVENTURA FL 33180	City-State-Zip:	AVENTURA FL 33180
Title	D		
Name	DEVITA, ANTONIO		
Address	19333 COLLINS AVE APT. #709		
City-State-Zip:	SUNNY ISLES BEACH FL 33160		

*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: ANTONIO DE VITA**

**SECRETARY &  
TREASURER**

**02/05/2019**

Electronic Signature of Signing Officer/Director Detail

Date