#### 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. PRESIDENT

SIGNATURE: HECTOR TORRES

City-State-Zip: BRICK NJ 08723

Electronic Signature of Signing Officer/Director Detail

Electronic Signature of Registered Agent

Officer/Director Detail :				
Title	PD		Title	SD
Name	TORRES, HECTOR S		Name	FRANANO, GINA
Address	8540 SW 52ND AVE		Address	125 CARIBE COURT
City-State-Zip:	MIAMI FL 33143		City-State-Zip:	GREEN ACRES FL 33413
Title	TD			
Name	APUZZO, JOSEPH CPA			
Address	337 DRUM POINT ROAD SUITE 1A			

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.

**Current Principal Place of Business:** 8540 SW 52 AVE MIAMI, FL 33143

## **Current Mailing Address:**

DOCUMENT# N0800006210

C/O JOSEPH APUZZO, CPA 337 DRUM POINT ROAD SUITE 1A BRICK, NJ 08723 US

### FEI Number: 26-2904805

# Name and Address of Current Registered Agent:

TORRES, HECTOR S PD 8540 SW 52 AVE MIAMI, FL 33143 US

SIGNATURE:

Entity Name: TICO TORRES CHILDREN FOUNDATION INC.

#### FILED Jan 30, 2023 Secretary of State 6545916974CC

Certificate of Status Desired: No

01/30/2023

Date

Date