

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000004785

Entity Name: LADIES EMPOWERMENT AND ACTION PROGRAM, INC.

FILED
Jan 27, 2023
Secretary of State
0588575896CC

Current Principal Place of Business:

3141 SW 8TH STREET
SUITE A
MIAMI, FL 33135

Current Mailing Address:

3141 SW 8TH STREET
SUITE A
MIAMI, FL 33135 US

FEI Number: 27-0193483

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LINDQUIST, MAHLIA A
1206 MADRID STREET
CORAL GABLES, FL 33134 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: MAHLIA LINDQUIST

01/27/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREA
Name GARCIA, GEMMA M
Address 6767 COLLINS AVENUE
City-State-Zip: MIAMI BEACH FL 33141

Title VP
Name WOODBURY, HOLLY
Address 2916 NW 12TH AVE
City-State-Zip: WILTON MANORS FL 33311

Title DIR
Name BOREN, SHED
Address 536 ALHAMBRA CIRCLE
City-State-Zip: CORAL GABLES FL 33134

Title DIR
Name ANZALOTTA, JAIME
Address 1154 W 35 STREET
City-State-Zip: HIALEAH FL 33012

Title DIRECTOR
Name LINDQUIST, MAHLIA A
Address 1206 MADRID STREET
City-State-Zip: CORAL GABLES FL 33134

Title SEC
Name BROWN, REBECCA
Address 350 NW 4TH ST
City-State-Zip: MIAMI FL 33128

Title CURRENT PRES
Name RONCAL, SILVANA
Address 2951 DAY AVENUE
City-State-Zip: MIAMI FL 33133

Title DIR
Name BELO-OSAGIE, TRIXIE
Address 1643 BRICKELL AVENUE #2001
City-State-Zip: MIAMI FL 33129

Continues on page 2

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: MAHLIA LINDQUIST

EXECUTIVE DIRECTOR

01/27/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIR
Name BROWN, KEVIN
Address 4000 PONCE DE LEON BLVD. STE. 470
City-State-Zip: CORAL GABLES FL 33146

Title DIRECTOR
Name VIEIRA, BERNARD
Address 50 MIRACLE MILE
City-State-Zip: CORAL GABLES FL 33134

Title DIR
Name GILLESPIE, NANCY
Address 1000 SOUTH POINTE DRIVE
APT. 2902
City-State-Zip: MIAMI BEACH FL 33139