

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000001340

**Entity Name:** WE ALL ONE FOUNDATION, INC.

**Current Principal Place of Business:**

1300 NW 192 TERRACE  
MIAMI, FL 33169

**Current Mailing Address:**

1300 NW 192 TERRACE  
MIAMI, FL 33169

**FEI Number: 27-1876693**

**Certificate of Status Desired: Yes**

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

JULIEN, FLORENS  
1300 NW 192 TERRACE  
MIAMI, FL 33169 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 P  
Name JULIEN, FLORENS  
Address 1300 NW 192 TERRACE  
City-State-Zip: MIAMI FL 33169

Title TREASURER  
Name SAINTIL, BERNADETTE  
Address 3099 NW 48 AVE. APT 464  
City-State-Zip: LAUDERDALE LAKES FL 33313

Title MEMBER  
Name FERTIL, BERLINE  
Address 1430 NW 79 TERRACE  
City-State-Zip: PEMBROKE PINES FL 33024

Title ASST. SECRETARY  
Name JULIEN, FERLANGE  
Address 1300 NW 192ND TERRACE  
City-State-Zip: MIAMI FL 33169

Title VP  
Name TELFORT, GISLAINE  
Address 8620 N SHERMAN CIRCLE  
506  
City-State-Zip: MIRAMAR FL 33025

*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: FLORENS JULIEN**

**P**

**04/18/2022**

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

\_\_\_\_\_  
Date