

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

DOCUMENT# N11000011874

**Entity Name:** SHARING HEAVENLY BLESSINGS INC.

**Current Principal Place of Business:**

5683 BERWOOD DRIVE  
ORLANDO, FL 32810

**Current Mailing Address:**

5683 BERWOOD DRIVE  
ORLANDO, FL 32810

**FEI Number:** 45-4331185

**Certificate of Status Desired:** No

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

BENSON, AMANDA  
5683 BERWOOD DRIVE  
ORLANDO, FL 32810 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                 |
| Name            | BENSON, AMANDA     | Name            | SANKARA, MOUSSA H |
| Address         | 5683 BERWOOD DRIVE | Address         | 5325 GLASGOW AVE  |
| City-State-Zip: | ORLANDO FL 32810   | City-State-Zip: | ORLANDO FL 32819  |
|                 |                    |                 |                   |
| Title           | D                  |                 |                   |
| Name            | BENSON, NICK       |                 |                   |
| Address         | 5683 BERWOOD DRIVE |                 |                   |
| City-State-Zip: | ORLANDO FL 32810   |                 |                   |

*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:** AMANDA BENSON

**DIRECTOR**

**04/05/2019**

Electronic Signature of Signing Officer/Director Detail

Date