

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000009400

**Entity Name:** MILTON BECERRA FOUNDATION, INC.

**Current Principal Place of Business:**

1900 N BAYSHORE DRIVE  
1015  
MIAMI, FL 33132

**Current Mailing Address:**

1900 N BAYSHORE DRIVE  
1015  
MIAMI, FL 33132

**FEI Number:** 46-3208463

**Certificate of Status Desired:** No

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

TESTAMARCK, ARIANA  
5255 COLLINS AVENUE  
9H  
MIAMI, FL 33140 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 MARTINEZ DE BECERRA, ROSAURA  
Address 1900 N BAYSHORE DR.  
City-State-Zip: MIAMI FL 33132

Title VP  
Name BECERRA, JONATHAN  
Address 1900 N BAYSHORE DR.  
City-State-Zip: MIAMI FL 33132

Title S  
Name BECERRA, HAMILTON  
Address 1900 N BAYSHORE DR.  
City-State-Zip: MIAMI FL 33132

Title T  
Name TESTAMARCK, ARIANA  
Address 5255 COLLINS AVE. APT. 9H  
City-State-Zip: MIAMI FL 33140

Title D  
Name BRILLEMBOURG, ADELAIDA  
Address 2417 NORTH MIAMI AVENUE  
City-State-Zip: MIAMI FL 33127

*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:** ROSAURA MARTINEZ DE BECERRA

**PRESIDENT**

**03/19/2023**

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

\_\_\_\_\_  
Date