

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000006794

Entity Name: HUMANITARY GROUP INC.**Current Principal Place of Business:**15701 WOODSHED PL
TAMPA, FL 33624**Current Mailing Address:**15701 WOODSHED PL
TAMPA, FL 33624**FEI Number:** 47-1392327**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REYES RIVAS, ANIBERKA A
15701 WOODSHED PL
TAMPA, FL 33624 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:** ANIBERKA REYES RIVAS

04/14/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	REYES RIVAS, ANIBERKA A
Address	15701 WOODSHED PL
City-State-Zip:	TAMPA FL 33624

Title	VP
Name	MEDINA REYES, ALONDRA JAMILETH
Address	15701 WOODSHED PL
City-State-Zip:	TAMPA FL 33624

Title	TREASURER
Name	HARRELL, PALOMA
Address	7215 FIRESIDE DRIVE
City-State-Zip:	PORT RICHEY FL 34668

Title	SECRETARY
Name	MARTINEZ, DAYANNARA
Address	4319 FOXGLEN LANE
City-State-Zip:	TAMPA FL 33624

Title	MANAGING DIRECTOR DOMINICAN REPUBLIC
Name	JIMENEZ GONZALEZ, YOSSELIN ALTAGRACIA
Address	CALLE DUARTE #98 VILLA PROGRESO
City-State-Zip:	VERAGUA

Title	EXECUTIVE DIRECTOR
Name	MEDINA-REYES, RANDY B
Address	15701 WOODSHED PL
City-State-Zip:	TAMPA FL 33624

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: ANIBERKA A REYES RIVAS**PRESIDENT OWNER**

04/14/2025

Electronic Signature of Signing Officer/Director Detail

Date