

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000002732

**Entity Name:** FALLEN HEROES UNITED, INC

**Current Principal Place of Business:**

17443 SW 155TH COURT  
MIAMI, FL 33187

**Current Mailing Address:**

1165 W 49TH ST  
STE 209  
HIALEAH, FL 33012 US

**FEI Number:** 47-3401213

**Certificate of Status Desired:** No

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

411TAXES.COM LLC  
1165 W 49TH ST  
STE 209  
HIALEAH, FL 33012 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:** MARCIA C. CARDENTY

04/30/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PRES, F  
Name LLERENA, RAYMEL  
Address 17443 SW 155TH COURT  
City-State-Zip: MIAMI FL 33187

Title VP, CF, T  
Name BYRD, ANTONIO  
Address 17443 SW 155TH COURT  
City-State-Zip: MIAMI FL 33187

Title VP, CF  
Name CANELA, JASON  
Address 17443 SW 155TH COURT  
City-State-Zip: MIAMI FL 33187

Title DIRECTOR  
Name NOGUES, YAMILL  
Address 17443 SW 155TH COURT  
City-State-Zip: MIAMI FL 33187

Title VP, CF  
Name NEGRON, JAVIER  
Address 17443 SW 155TH COURT  
City-State-Zip: MIAMI FL 33187

Title S  
Name CARDENTY, MARCIA C  
Address 1165 W 49TH ST  
STE 209  
City-State-Zip: HIALEAH FL 33012

Title DIRECTOR  
Name GARCIA, CARY  
Address 17443 SW 155TH COURT  
City-State-Zip: MIAMI FL 33187

*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:** ANTONIO BYRD

VICE-PRESIDENT

04/30/2021

Electronic Signature of Signing Officer/Director Detail

Date