

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000002732

Entity Name: FALLEN HEROES UNITED, INC

Current Principal Place of Business:

13400 SW 128 STREET
MIAMI, FL 33186

FILED
Apr 30, 2017
Secretary of State
CC2660955155

Current Mailing Address:

1165 W 49TH ST
STE 209
HIALEA, 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
HIALEA, 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. CARDENTHEY

04/30/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES, F
Name LLERENA, RAYMEL
Address 14650 SW 160TH TERR
City-State-Zip: MIAMI FL 33177

Title VP, CF
Name BYRD, ANTONIO
Address 1333 SW 269TH TERR
City-State-Zip: HOMESTEAD FL 33032

Title VPCD
Name ILLESCAS, LUIS JAVIER
Address 14650 SW 120TH STREET
SUITE 105
City-State-Zip: MIAMI FL 33186

Title T
Name NOGUES, YAMILL
Address 14345 SW 120TH STREET
SUITE 105
City-State-Zip: MIAMI FL 33186

Title VP, CF
Name NEGRON, JAVIER
Address 22751 SW 167TH AVE
City-State-Zip: MIAMI FL 33170

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

Title DIRECTOR
Name DUKE, DANIEL
Address 13400 SW 128 STREET
City-State-Zip: MIAMI FL 33186

Title DIRECTOR
Name GARCIA, CARY
Address 13400 SW 128 STREET
City-State-Zip: MIAMI FL 33186

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: RAYMEL LLERENA

PRESIDENT

04/30/2017

Electronic Signature of Signing Officer/Director Detail

Date