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

#### DOCUMENT# N17000011657

#### Entity Name: SOCIEVEN FOUNDATION INC

# **Current Principal Place of Business:**

7971 RIVIERA BOULEVARD SUITE 105 MIRAMAR, FL 33023

# **Current Mailing Address:**

7971 RIVIERA BOULEVARD SUITE 105 MIRAMAR, FL 33023 US

## FEI Number: 82-3487971

## Name and Address of Current Registered Agent:

CMA SYSTEMS INC 130 HIDDEN COURT ROAD UNIT 25D HOLLYWOOD, FL 33023 US Certificate of Status Desired: No

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

#### **Officer/Director Detail :**

Title	DIRECTOR, VP	Title	DIRECTOR		
Name	NERI DE BECKHOFF, CARMEN T	Name	GARCIA, CARLOS G		
Address	7971 RIVIERA BLVD, SUITE 105	Address	9778 NW 10TH STREET		
City-State-Zip:	MIRAMAR FL 33023	City-State-Zip:	MIAMI FL 33172		
Title	DIRECTOR	Title	DIRECTOR		
Name	NERI, GABRIELA	Name	ESTABA DE BOULTON, RHAIZA		
Address	710 N ITHAN AVE	Address	14259 NW 18 MNR		
City-State-Zip:	BRYN MAWR PA 99010	City-State-Zip:	PEMBROKE PINES FL 33028		
Title Name Address City-State-Zip: Title Name Address City-State-Zip:	DIRECTOR CHACON, OTILIA 2629 LINCOLN AVE MIAMI BEACH FL 33133 DIRECTOR, SECRETARY ROMER, ANA 9113 NW 33RD ST MIAMI FL 33172	Title Name Address City-State-Zip: Title Name Address City-State-Zip:	DIRECTOR BECKHOFF, VALERIA 310 W 4TH ST. APT.803 WINSTON-SALEM NC 27101 DIRECTOR, TREASURER HERNANDEZ, ANDRES 9113 NW 33RD ST. MIAMI FL 33172		
		ony-orale-zip.			

#### Continues on page 2

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: ANDRES HERNANDEZ		DIRECTOR	04/18/2019
	Electronic Signature of Signing Officer/Director Detail		Date

# FILED Apr 18, 2019 Secretary of State 0614603525CC

Electronic Signature of Signing Officer/Director Detail

# **Officer/Director Detail Continued :**

Title	DIRECTOR, PRESIDENT, CHAIRMAN	Title	DIRECTOR
Name	NERY DE TROCONIS, MARIA DE LA LUZ	Name	DOLMAN, MARIA
Address	CARRERA 17 #119-05, EDF. SAUCE #201	Address City-State-Zip:	9113 NW 33RD ST. MIAMI FL 33172
City-State-Zip:	BOGOTA 110111		
Title	DIRECTOR		

Name	PLAZA, MARTA
Address	4280 OAKS TERRACE APT.101

City-State-Zip: POMPANO BEACH FL 33069