

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

DOCUMENT# N18000005279

**FILED**  
**Apr 10, 2019**  
**Secretary of State**  
**1123958111CC**

**Entity Name:** PROJECT RELEASE OF FLORIDA INC.

**Current Principal Place of Business:**

605 NW 2ND STREET  
FLORIDA CITY, FL 33034

**Current Mailing Address:**

605 NW 2ND STREET  
FLORIDA CITY, FL 33034 US

**FEI Number: 82-5504255**

**Certificate of Status Desired: No**

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

FORBES-MOOREHEAD, ALEXIS N  
605 NW 2ND STREET  
FLORIDA CITY, FL 33034 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 FORBES-MOOREHEAD, ALEXIS N  
Address 605 NW 2ND STREET  
City-State-Zip: FLORIDA CITY FL 33034

Title VP  
Name MOOREHEAD, RONNI A JR  
Address 605 NW 2ND STREET  
City-State-Zip: FLORIDA CITY FL 33034

Title D  
Name MOISE, BIANCA S  
Address 598 NW 96TH STREET  
City-State-Zip: MIAMI FL 33055

Title D  
Name DAVIS, EDMOUND  
Address 3610 N 56TH AVE  
City-State-Zip: HOLLYWOOD FL 33021

Title DIRECTOR  
Name YAMOUT, CHIRINE  
Address 3202 NW 88TH AVE  
City-State-Zip: SUNRISE FL 33351

*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: ALEXIS NICOLE FORBES-MOOREHEAD**

**PRESIDENT**

**04/10/2019**

Electronic Signature of Signing Officer/Director Detail

Date