## 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000005947

Entity Name: LIVE HEALTHY LITTLE HAVANA, INC.

**FILED** Jan 03, 2023 **Secretary of State** 3204906193CC

## **Current Principal Place of Business:**

515 SW 12TH AVENUE SUITE 525 MIAMI, FL 33130

## **Current Mailing Address:**

515 SW 12TH AVENUE **SUITE 525** MIAMI, FL 33130 US

FEI Number: 83-1880728 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

PINILLA, MARTIN 515 SW 12TH AVENUE SUITE 525 MIAMI, FL 33130 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

Officer/Director Detail:

Title DIRECTOR Title TREASURER, DIRECTOR

FERNANDEZ, RAISSA Name Name PINILLA, MARTIN

515 SW 12TH AVENUE 515 SW 12TH AVENUE Address Address SUITE 525

SUITE 525

City-State-Zip: MIAMI FL 33130 City-State-Zip: MIAMI FL 33130

Title SECRETARY, DIRECTOR Title **DIRECTOR** 

Name TROY, ROBERT DR. Name FERREIRA DE MELO, ANAMARIE

Address 515 SW 12TH AVENUE Address 515 SW 12TH AVENUE

SUITE 525 SUITE 525

City-State-Zip: MIAMI FL 33130 City-State-Zip: MIAMI FL 33130

Title CHAIR, PRESIDENT Title DIRECTOR

FALCON, ASHLEY MASCORRO, ADRIANA BRENDA Name Name

515 SW 12TH AVENUE 515 SW 12TH AVENUE Address Address

SUITE 525 SUITE 525

City-State-Zip: MIAMI FL 33130 City-State-Zip: MIAMI FL 33130

**PRESIDENT** 

Date

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.