

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

DOCUMENT# N19000006510

**Entity Name:** MONAT GRATITUDE, INC.

**Current Principal Place of Business:**

10000 NW 15 TERRACE  
DORAL, FL 33172

**Current Mailing Address:**

10000 NW 15 TERRACE  
DORAL, FL 33172 US

**FEI Number: 84-3043046**

**Certificate of Status Desired: No**

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

CF REGISTERED AGENT, INC.  
100 S. ASHLEY DRIVE  
SUITE 400  
TAMPA, FL 33602 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 D, CHAIRMAN, CEO  
Name URDANETA, LUISAYLEN M  
Address 10000 NW 15 TERRACE  
City-State-Zip: DORAL FL 33172

Title D, VC  
Name MACMILLAN, STUART A  
Address 10000 NW 15 TERRACE  
City-State-Zip: DORAL FL 33172

Title D  
Name URDANETA, FRANCISCO J  
Address 10000 NW 15 TERRACE  
City-State-Zip: DORAL FL 33172

Title D/S  
Name MENDOZA, IVIS  
Address 10000 NW 15 TERRACE  
City-State-Zip: DORAL FL 33172

Title D/T  
Name LOPEZ, MARC  
Address 10000 NW 15 TERRACE  
City-State-Zip: DORAL FL 33172

*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: IVIS MENDOZA**

**SECRETARY**

**04/30/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date