

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20000006520

**Entity Name:** THRIVE ON INC

**Current Principal Place of Business:**

9704 PINES BLVD  
PEMBROKE PINES, FL 33024

**Current Mailing Address:**

9704 PINES BLVD  
PEMBROKE PINES, FL 33024 US

**FEI Number: 85-1673839**

**Certificate of Status Desired: No**

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

SOLIS, ANDREA  
9704 PINES BLVD  
PEMBROKE PINES, FL 33024 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 SOLIS, ANDREA  
Address 9704 PINES BLVD  
City-State-Zip: PEMBROKE PINES FL 33024

Title VP  
Name RUIZ, CARLOS  
Address 9704 PINES BLVD  
City-State-Zip: PEMBROKE PINES FL 33024

Title SEC  
Name GOMEZ, CLARA  
Address 9704 PINES BLVD  
City-State-Zip: PEMBROKE PINES FL 33024

Title TREA  
Name DISLA, SIDEL  
Address 9704 PINES BLVD  
City-State-Zip: PEMBROKE PINES FL 33024

*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: ANDREA SOLIS**

**PRESIDENT**

**03/15/2023**

Electronic Signature of Signing Officer/Director Detail

Date